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After an overview by Kenneth R. Blessing, eight positional papers consider the role of the resource consultant in various areas of special education and discuss the current and envision the future consultant role. Lou Alonso and Charles E. Henley treat the area of the visually impaired; Hazel Bothwell, the hearing impaired; Peter Knoblock, the emotionally disturbed; Grace J. Warfield, the mentally handicapped; June Bigge, the physically handicapped; and Ruth A. Martinson, the gifted. Also discussed are the state consultant in speech correction and the consultant for children with learning disabilities. Profiles of the contributors are provided. (JD)

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Kenneth R. Blessing, Editor

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
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1 / Overview

KENNETH R. BLESSING

This monograph has been developed under the auspices of The Council for Exceptional Children in order to delineate the major tasks of supervisors in special education. Its publication is both timely and appropriate, since special education is approaching institutional maturity on the American educational scene. The explosion of new theories and knowledge resulting from contributions of research, federal activities in the realm of special education, and the more receptive cultural milieu has hastened this process of maturation. Maturity entails certain responsibilities along with recognition of independent status. Yet great institutions, including the public schools, have been notoriously slow to change, implement, and facilitate the movement of new knowledge and ideas from the realm of theory and research into practice within the schools.

Historical Development of Consultative Practices

The process of supervision is one of the primary ways in which the public schools attempt to reduce the time lag between new knowledge and its implementation in practice. As a fairly distinct profession, supervision is a comparative newcomer among the educational occupations, since it became an integral part of our educational system in the latter half of the nineteenth century. Supervision as a function has evolved through a number of stages during the century or more of its existence, including the inspectorial, the supervisory, and presently, the consultative phase. There have existed a number of misconceptions regarding the nature of supervision and the functions of supervisors during this process of evolvement. For example, the era is past when state supervision was an accepted annual tyranny to be endured while the state inspector was visiting the area. Emphasis during this period was on the more tangible aspects of the school plant, such as inspecting the ventilation, lighting, and heating of classrooms.

During the supervisory era, strong emphasis on instructional techniques and practices was necessary to provide for inadequacies and gaps in the limited undergraduate training of teachers. Focus was primarily upon a teacher training function designed to bolster up programs which otherwise would have tottered because of the inadequate preparation of teachers for the tasks confronting them. Many temporary arrangements were made in order to meet the need for training prospective and experienced teachers, and such devices as institutes, summer schools, and reading circles became popular. This concept of supervision continued into the present century and, until a few decades ago, principals and supervisors were perceived as educational foremen who, through close supervision, helped to compensate for ignorance and lack of skill in their subordinates. Vestiges of this concept of supervision undoubtedly exist even in our enlightened era.

The *consultative* point of view has evolved as a result of a number of educational developments, such as more competently trained instructors, newer concepts of child development, greater militancy in the teaching ranks, and the recognition that the supervisor's role is not perceived either by teachers or by principals as it has previously been perceived by the supervisors themselves. It has been noted, for example, that many teachers today are commonly as well prepared in their fields of specialization as are principals and supervisors in theirs. Similarly, the impact of child development theory and the influence of the child centered curriculum have played a major role in effecting change in supervisory function. Responsible freedom is essential for the release of a teacher's full creative potentialities. Schools have begun to recognize that in the development of a well informed, effective citizenry, democratic practices must begin with and pervade the school and the individual classroom; schools also recognize that a teacher, in order to be an effective instructor, must be free to exercise her talents within the framework of democratic organization and supervision of personnel. The implication is crystal clear that the current educational supervisor must adopt democratic personnel practices. Moreover, supervisors must become more concerned with the psychological mechanisms that are operating between the teacher and the supervisor. Recent studies seem to suggest that supervisors may profitably spend their time learning more about the drives, motives, and problems of the teachers and then providing feedback information to these teachers about their instructional concerns and interactions with pupils.

The Modern Resource Consultant

Within the context of this historical overview of the development of the supervisory process, the contributors to this monograph have elected to utilize the term *resource consultant* to designate the supervisor and the democratic nature of his role and function in special education. The role of the resource consultant is especially significant at this period of special education's development, since the major function of supervision is the facilitation of growth and the fostering of meaningful change. To be on the leading edge of change requires dynamic supervision. The kind of resource assistantship described in the various chapters of this monograph reflects the type of dynamic supervision which best lends itself to the philosophy of special education. This type of resource role is one that is basically concerned with program growth, feedback information, and change. Change in and of itself does not necessarily insure educational improvement, but in order to facilitate improvement in special education programs, change becomes inevitable.

Good supervision in our special education programs today helps provide the kind of leadership which lifts our sights and helps us to improve the quality of learning opportunities for exceptional children and youth. It is a process of helping teachers find more effective solutions to their administrative, curricular, instructional, and management problems. It helps teachers develop skills in objective and cooperative ways of working in team teaching situations, in using paraprofessionals, and in utilizing new hardware and other teaching media. It helps teachers develop a realistic sense of confidence in their own decision making abilities. As we move into yet another era, supervision emphasizes the objective feedback of information to teachers about their practices. It provides descriptive models of effective teaching behaviors which may be used as "mirrors" to be employed by resource consultants to permit special educators to see and modify their own teaching behaviors.

In essence, good supervision enables teachers to change the way they see things in the light of careful and cooperative study of facts. It utilizes research tools for inservice and continuing education functions. It fosters a democratic climate conducive to learning and provides teachers with the stimulus to experiment and try better ways of doing things. It also helps teachers feel they are not working alone, but are partners in important educational enterprises. Such changes as the introduction of new methods or techniques, innovative methods of grouping, expansion of services, improvement of curriculum, or initiation of a research project are all illustrative features of a program of dynamic supervision. The underlying premise of dynamic supervision is that each staff member is capable of growth and desires to mature professionally. This, then, is the broad conceptual role of the modern resource consultant in special education, the role which was considered basic to each contributor's presentation in this monograph.

Format of the Monograph

Contributors to this publication reflect a wide range of diversified talents and experiences. Viewpoints of those in higher education or in state educational agencies and of local consultants of special education are represented, and present fresh as well as divergent points of view relative to their respective levels of concern and operation. Each of the participants was requested to develop a positional paper discussing the role of the resource consultant in a specific area, also treating, in depth, the current nature of the consultant roles in administrative, supervisory, and coordinative functions. Finally, each contributor was asked to envision the future role of the resource consultant as special education comes of age. How well each of the writers accomplished his assignment will be left to the judgment of subsequent students of the art of educational supervision. The editor has assumed some responsibility for providing internal consistency within the monograph and errors in style or content may be attributed to an occasional need to edit or delete certain sections of each chapter.

Individual Contributions

By delineating some of the highlights of each chapter, the following cursory review may assist the reader in understanding the global nature of this assignment.

Alonso and Henley's chapter identifies trends and suggests the various administrative, supervisory, and consultative services that resource consultants may provide to regular and special educators to insure that visually impaired children and youth receive the quality education they deserve. Writing from their vantage point within higher education these authors provide an extensive number of recommendations for programing at the federal, state, regional, metropolitan, and residential school levels. Suggestions are also included for training leadership personnel in the area of the visually handicapped in institutions of higher learning.

Bothwell's chapter reflects her extensive experience as a state consultant in the education of the deaf and hard of hearing. The dearth of leadership personnel in this area and the plight of the hearing impaired child are highlighted in her introductory remarks. Problem areas influencing the development of educational programs and services in local, regional, residential, and state programs are clearly outlined. These issues are followed by a delineation of the supervisory, administrative, and coordinative roles of the consultant for hearing impaired children and youth. A look at the future of the consultant in this program area concludes her chapter.

Knoblock's chapter considers the need to conceptualize a particular role definition for the resource consultant in educational planning for emotionally disturbed children. In a field so multidisciplined and populated by professional workers with diverse training and philosophies, this need is highlighted in his paper. The interrelated dimensions influencing role definition, such as size of school district and the mental health climate of the region, are delineated in some detail. Similarly the positional paper suggests several possible designs for the utilization of resource consultants in this area. Of particular interest to the reader will be his suggested patterns of inservice training approaches related to a clearly articulated philosophy and set of educational goals. This thought provoking chapter provides both a theoretical framework and realistic operational approaches for use by resource consultants in the education of the emotionally disturbed.

Warfield's chapter on the resource consultant in the area of mental retardation has the flavor of local school district consultative experience. Highlighted in this chapter is the need for the consultant in mental retardation to possess expertise and knowledgeability with respect to federal, state, community, and private agencies which have responsibilities directly overlapping this area. Grantsmanship skills in procuring funding assistance at all levels and the ability to conduct evaluative studies of program operations are considered to be the prime requisites of the current resource consultant. Program elements of planning, budgeting, personnel, supervision, and curriculum development, all prime concerns of the consultant, are treated in some detail. The special education consultant's relationship to general education, generic school principals, and other supportive school personnel is explored. Finally, Warfield projects the emerging role of the consultant as a media specialist and the technological assistance he can anticipate from such diverse sources as the developing Instructional Materials Centers, ERIC-CEC, the Bureau of Education for the Handicapped, and other new resources.

Black's chapter on the resource consultant in speech correction programs has been written from her vantage point gained by extensive experience in consulting from the state agency level. The quarter of a century development of this service is considered as well as the day to day functions of the current speech therapy consultant. Suggestions for successful recruitment practices and liaison with institutions of higher learning are included. The need for cooperative relationships with other professional disciplines is stressed, particularly the interdependence between the classroom teacher and the therapist. Unique to this chapter and monograph are her suggestions for office management procedures, an area often ignored in discussing the full utilization of the professional talents of the consultant.

Bigge's chapter considers the resource consultant in programs for the physically handicapped in some detail. Bigge has developed an extensive listing of the various roles of a resource consultant and then has carefully extended and expanded this outline to some depth. She clarifies relationships between the resource consultant and other leadership personnel within the school setting, e.g., the building principal, and she also details specific responsibilities of school principals in relation to crippled children's programs and services. Interdisciplinary relationships of the medical, therapeutic, and educational phases of the program are outlined and the place of the teacher aide and/or matron on the professional team is operationally defined.

Martinson's chapter indicates that the resource consultant for the gifted is a kind of Johnny Come Lately among special consultants. She describes the diverse backgrounds of preparation and experience of specialists in this area and considers the unique challenges facing the consultant who prepares for this field of endeavor. Since consultants in programs for the gifted are the exception rather than the rule, her chapter is more of a future projection than a delineation of the existing role. Readers will discover within this positional paper a number of original concepts pertaining to the consultant function in programs for the gifted.

Barsch's chapter, concerned with the consultant for children with special learning disabilities, represents perhaps the most far reaching and challenging point of view expressed in this monograph. Not only does the writer suggest a fairly extensive revision of the consultant image, but he develops a case for the new clinicopedagogist within the context of the equally elusive category of "the child with learning disabilities." He points out that the emergence of the SLD child on the special education scene is the result of a void in the existing proliferated structure and suggests that this child may have a "touch" of many existing syndromes, yet his characteristics defy precise classification in any single existing group. The conclusion reached by the author is that a synthesizing consultant role will eventually emerge, one which will represent a departure from the medical model, to focus on learning and behavioral impairment.

Summary: The Future

This monograph should serve as a point of departure for future students of the consultative or supervisory process in special education. It represents a rather clear and concise statement of the status of the art as practiced in the Sixties and presents some educated guesses as to the form and shape consultation in special education will take in the next decade.

In light of the many ideas expressed in the various chapters, it becomes quite clear that certain practices in supervision which used to be quite common are open to serious question. If the crucial task of the resource consultant is to facilitate the movement of workable ideas from their formulation in theory and research into special education practice in the schools, a new breed of supervisor is required. If the major task of supervision is the facilitation of growth and development in special educators and pupils, new consultative practices and roles must be considered and must evolve. As we move into another era of supervision, with major emphasis upon the objective provision of information to teachers about their classroom practices, the newer breed of resource consultant will be faced with further challenges. Feedback processes, teacher learner interaction analysis, simulator training utilizing realistic supervisory problems, and other research based tools of supervision will need to be mastered and utilized in the consultative role.

Yet, if one assesses the progress that has been made in the resource consultant's role since the initial inspectorial phase, one cannot but enthusiastically admit that measurable progress has been achieved. The challenge is there for future generations of resource consultants to carry forward the work of their forerunners in the history of special education.

2 / The Role of the Resource Consultant in the Education of the Visually Impaired

LOU ALONSO

CHARLES HENLEY

Current trends in child education, particularly changes regarding visually impaired children and the means of educating them, demand a reevaluation of the need for and the role of the resource consultant. This chapter briefly identifies the trends and suggests the various administrative, supervisory, and consulting services that resource consultants may provide to regular and special educators to insure visually impaired children and youth the quality education they deserve.

Current Issues

Since 1957, increasing numbers of visually impaired youngsters have been enrolled in public school programs of varying types, reversing the historical pattern of residential school placement for most of these pupils. Then, too, a philosophy has slowly evolved that *all* children, regardless of severity of impairment, color of skin, religious affiliation, or street address, have an inherent right to achieve their own individual potential. These trends parallel the effort on the part of public school and university personnel to upgrade curricular content and apply learning theory so that pupils may learn efficiently and effectively in the face of an awesome knowledge explosion.

A close examination of the trends which influence educational planning for visually impaired pupils raises the following questions:

1. Does public school special class placement offer visually impaired children of normal intelligence a real opportunity for learning—when children of widely varying ages are placed in a special, segregated class?

2. In the face of the knowledge explosion, does the average residential high school program offer visually impaired youth the wide range and depth of subject offerings, qualified personnel, and specialized equipment required for college bound pupils?
3. Do present public school programs provide for the other needs of severely visually impaired children and youth: the opportunities to learn to get about independently from place to place, the skills of daily living, the obvious advantages of a complete physical education program, and courses in home economics, shop, electronics, arts and crafts, and others?
4. In light of increasing numbers of visually impaired children presenting additional impairments, do we conduct adequate diagnostic services leading to creatively conceived programs that insure these youngsters opportunities to achieve their individual potential?
5. Are we implementing research results in educational practice—for example, teaching children to make effective use of limited residual vision, directing teachers and parents to available low vision clinics so that approximately one-half of the children with limited residual vision may be helped to see better and perhaps use their vision in doing their school work?
6. How well do we provide quality education programs to children in areas of low population density where there are few visually impaired pupils?
7. Are parents of preschool visually impaired children receiving counseling and guidance and home visitor service, and are their youngsters offered nursery school experiences to prepare them for school?
8. With the increased focus on junior and community college programs, are public and residential school personnel expanding their services to include visually impaired youth in these programs?

These and other questions presently under discussion suggest a degree of unrest among personnel in the field. The very diversity of needs strongly suggests an increased use of highly qualified resource consultants to work broadly and cooperatively with teachers and administrators in resolving these issues to permit the development of educational programs of equal quality for visually impaired children and youth everywhere.

Who is the "Resource Consultant"?

The term resource consultant does not necessarily describe a specific and well defined position within the administrative framework of the special education program. A person employed under the title of resource consultant in one setting may be known by various other titles in other settings, such as supervisor, advisor, specialist, coordinator, or helping teacher.

The resource consultant in the education of visually impaired children may be found in a variety of types of settings and levels of programing, including local school districts, intermediate or county districts, public or private residential schools, and state departments of education. In any and all of these settings, the consultant should be an essential part of the special education team, contributing a particular kind of expertise to the total effort for visually impaired children. The precise role assigned will vary in accordance with the individual setting and the specific nature of the position as defined by the administration.

Whatever the variables concerning title, setting, and specific role, the resource consultant may be described as an experienced certified specialist in the education of visually impaired children and youth. The role is primarily concerned with the development and improvement of the total program for the education of visually impaired children and youth. The functions generally fall into three broad categories: administrative, supervisory, and coordinative.

Although some college and university graduate programs offer a course of advanced study which prepares resource consultants for the education of visually impaired children, the present status of such personnel reveals that only the following qualifications are typically required: a masters degree; state certification to teach visually impaired children and youth; and successful experience in teaching educationally blind and partially seeing pupils.

Importance of Resource Consultant to Program Success

As total special education programs grow and expand throughout the states, it becomes increasingly important for specialists to be assigned to the various areas of special education at all levels. Directors of special education and other administrative officials need to utilize specialists in the planning of effective programs in order to free themselves to efficiently carry out overall administrative responsibilities.

The administrator of special education, regardless of level of functioning, is ordinarily considered a generalist. He should have certain knowledges and competencies with regard to each of the disability areas, but he cannot be expected to know each area to the depth required for maximum program planning and effectiveness. This means that the administrator requires the assistance and support of consulting specialists.

The resource consultant in the education of visually impaired children and youth generally assists the administrator (a) in the development of the philosophy of education that will prevail in program planning; (b) in the supervision of the total effort (which includes inservice education for the special educators); (c) in making recommendations with regard to special books, instructional materials and aids; and (d) in preparing an organizational plan which can best be utilized to provide visually impaired pupils with proper instruction in keeping with changing individual needs.

Differentiation of Administrative and Supervisory Responsibilities

Regardless of whether the position is at the local, residential school, intermediate, county, or state level, the resource consultant generally has a staff position, rather than a position in the direct line of authority. As a result, a resource consultant will typically report to an administrator, and often to a director of special education. Although the consultant will be delegated certain responsibilities for assisting the administrator in the operation of the program for the education of visually impaired pupils, these duties should be supervisory and coordinative in nature, related to the instructional program and also to its improvement.

It is inevitable, however, that a resource consultant will be called upon to perform limited administrative functions. This is entirely appropriate and desirable as long as it remains advisory in nature and does not require excessive amounts of time. The administrative aspects of the position must not be allowed to overshadow the supervisory and coordinating functions which represent the most effective use of the talent of the specialist.

An examination of the administrative functions, regardless of location of the position, reveals the following expectations:

Program Development and Improvement. The resource consultant is invaluable to the administrator in planning and establishing the philosophy of education for a *total* educational program for visually impaired children and youth, from preschool through junior college. Familiarity with general education, established programs, outside resources, problem areas, and pitfalls of programing—all enable the resource consultant to assist in determining the basic nature of a new or reorganized program for visually impaired pupils.

Development of Policy. The resource consultant plays an indirect role in the development of policy relating to the educational program for visually impaired children. This person is in a unique position to evaluate needs, to provide consistent decision making with regard to all operational aspects of the program, and to make recommendations to the administrator for the establishment of policy in these areas.

Records. It is inevitable that the resource consultant will become involved with various record and accounting activities. The consultant is in a position to make recommendations as to what records are needed, and he should have some responsibility for seeing that necessary records are maintained in a usable form. It is important to stress that the consultant's role in record keeping should be minimal so that this type of administrative detail does not take time away from the more important aspects of program development and improvement.

Improvement of Physical Facilities Providing for Instructional Materials. The resource consultant needs to plan for improved physical facilities as they relate to changing educational programs. This includes arranging for additional classroom and storage facilities; providing learning aids and equipment; and planning for the reproduction of instructional materials in braille, large type, and recorded form to parallel the content of the materials used in the general school program. This may involve the recruitment of volunteer forces to reproduce regularly printed materials or to design adaptations of materials which are inappropriate in their original form.

Evaluation. The resource consultant assumes the responsibility for evaluation of program effectiveness and the personnel involved in its operation. This activity is most effective when it emphasizes evaluation for the purpose of improving teaching effectiveness. Evaluation of the total program for the education of visually impaired children and youth must be a continuing activity requiring various approaches and interactions to obtain an adequate picture and to nurture a continuing pattern of growth.

The resource consultant may wish to arrange for outside assistance in the evaluation process, utilizing such resources as university special education personnel, US Office of Education specialists, state departments of education resource consultants, local and residential school consultants, or other nationally recognized authorities in the education of visually impaired children and youth. The utilization of the staff for self evaluation, as well as program evaluation, cannot be stressed strongly enough as being important to staff coordination, program planning, and inservice education.

Approaches to Programing for Visually Impaired Pupils

Before discussing precise roles of consultants at the various levels, one should note that, since children with a visual impairment represent a small incidence of impairment, a local district sometimes has too few pupils to plan a total educational program to meet the students' needs. This is particularly true of areas with sparse population or small communities far removed from others. The organizational plans of some states encourage local districts to plan together in order to provide a population base or geographical area large enough to permit the employment of a special educator. In Michigan, for example, legislation permits the districts to join "intermediate school districts" for this purpose. Teacher counselors who are broadly prepared in physical disability may be utilized in the education of visually impaired children who are enrolled in regular classrooms. (A similar role exists to serve mentally retarded children.) Teacher counselors typically travel over a wide geographical area to serve the pupils and their teachers.

Similar regional planning is permitted under Wisconsin's legislative statutes. Wisconsin's archaic 72 county superintendencies were disbanded in 1965 and 19 Cooperative Educational Service Agencies (CESA) were established, overlapping county and school district lines. These CESA agencies can provide area wide special education services for the smaller school districts and more sparsely populated areas. Another provision in the school law permits two or more districts to jointly operate a service for handicapped groups which have a low prevalence rate. One of the districts functions as the operating agency, filing annual plans of service, making annual claims, and collecting pro rata costs from the remaining cooperating districts after state aids have been received. These two approaches have greatly facilitated educational programing for rural handicapped youth in Wisconsin.

Local districts unable to offer special programs could also be served by a residential school resource consultant on a less intense basis when such consultants are available nearby. On the other hand, metropolitan school districts usually enroll visually impaired pupils in: (a) special classes from which the children may go to regular classrooms for all or part of the school day; (b) regular classes with provision of a specialist in the education of visually impaired children in a special classroom in the building where youngsters may go for special teaching as required; or (c) regular classes with provision of an itinerant or "traveling" teacher who calls on the pupils and their regular teachers in the neighborhood schools, offering special instruction and materials. Combinations of these, as well as other plans, are desirable to fit community and individual needs.

Supervisory and Coordinating Functions of a Resource Consultant

The supervisory and coordinating functions of the resource consultant may best be described as those functions that involve improving instruction and solving problems in the teaching learning process. It is in this area that the resource consultant makes the most valuable contribution toward effecting change in programing and teacher behavior.

Because there are differing program needs at the several possible levels of service, it may be fruitful to examine some of the usual supervisory and coordinating duties by levels—local district, state, and national. This breakdown of duties is not meant to be exhaustive or restrictive, but rather should suggest the types of activities in which resource consultants become involved.

Metropolitan, Intermediate, County, or Residential School Consultants. These consultants may perform the following functions:

1. Provide inservice education for new teachers of visually impaired children. This education is planned to realistically meet the job needs of a teacher new to the system, whatever the

teacher's duty: the teacher in the public school resource room or cooperating room, itinerant teacher, teacher counselor, or residential school teacher. Such a program takes into account the individual characteristics of visually impaired children, of staff members, and of the teaching situation. Help may be provided new teachers to deal with the problems of scheduling; locating equipment and materials; keeping records; and interacting with parents, other teachers and administrators, and agency personnel. New teachers need to be familiarized with the curriculum and administrative expectations and find it particularly helpful to meet as a group with the resource consultant during the early part of the school year to resolve problems and develop understanding.

2. Provide a well planned and continuing program of inservice education for all teachers of visually impaired children and youth in the system. This may include seminars, workshops, institutes, or discussion groups which may be planned for short or long periods of time and may be arranged either independently or in cooperation with local agencies, the state resource consultant, colleges, or parents. Training may be related to curriculum, teaching techniques, and instructional materials. These sessions may: (a) demonstrate the use of instructional materials, equipment, or teaching methods appropriate for visually impaired children and youth; (b) provide information about ongoing research projects or results of completed studies and the educational implications; (c) report evaluations of instructional materials; and (d) provide relevant information from journals, drawing attention to books available in the school professional library and/or discussing the contents.
3. Provide guidance and consultation to general educators either through inservice education meetings or individually.
4. Engage in preservice education in cooperation with college and university programs of preparation of teachers of visually impaired children and youth; assist in arrangements for the placement of student teachers with qualified supervising teachers; accept placement of graduate students who are preparing to be local district resource consultants for visually impaired children and youth in order to enable these students to learn the supervisory and coordinating functions prior to being responsible on

a first job; and arrange and participate in seminars for college and university students.

5. Observe specific children in classrooms and offer suggestions to teachers with regard to effective ways of working with an individual child.
6. Participate in teacher parent conferences.
7. Attend and encourage the staff to attend local, regional, and national meetings in general and special education.
8. Encourage the staff to enroll in college and university programs for course work that leads to the masters degree, to additional certification, to becoming a master teacher of the visually impaired, or to qualifying for supervisory status.
9. Encourage the development of unique public school organizational plans to better serve visually impaired children in the system. These might include itinerant and cooperative plans when these are not in operation, a close liaison with the residential school resource consultant to enhance cooperative planning and movement of children, and close interaction with the state resource consultant to maintain the broad perspective.
10. Interact with public school resource consultants to learn more about individual children in residence, their families and interested others, in preparation for the children's return to the local community.
11. Provide supervisory and coordinating services to local public school districts without a resource consultant.
12. Support teachers by being available for daily assistance when necessary and by acting as a facilitator to the special educators in simplifying record keeping, making materials available, and performing other services that enable teachers to do their job well. Boost teacher morale.
13. Keep the staff informed of what is happening or about to happen within the system. This gives them a feeling of belonging and of being considered.
14. Recruit the best teachers available.
15. Be an effective public relations person representing visually impaired children and their teachers to other educators and to the community via meetings, writing, public communication, and individual contacts.
16. Work with other consultants in special education and cur-

riculum to coordinate efforts, including those for multiply handicapped pupils.

17. Share results of the consultant's efforts with others through meetings with other local district resource consultants and through contributions to the literature and program presentations at these meetings.

State Department of Education Resource Consultants. These consultants may perform the following duties:

1. Set forth a statement of the philosophy of education for visually impaired pupils to clarify the goals, regardless of the school setting.
2. Provide inservice education for new local district resource consultants to help them help others more effectively, and provide information about the state plan, records, quota account, and other pertinent information.
3. Provide inservice education for resource consultants in the education of visually impaired children and youth, giving them opportunities to meet together on a regular basis to share the means of solving recurring problems, facilitate the movement of pupils to meet changing needs, and coordinate efforts and encourage an evenness of quality among programs in the state.
4. Keep abreast of new developments in general and special education.
5. Provide leadership in planning statewide conferences for teachers of visually impaired children and youth and related personnel, utilizing residential and public school resource consultants in the planning and on the programs.
6. Coordinate the efforts of residential and public school resource consultants and facilitate a desirable easy movement of children from one type of program to another, as needed.
7. Insure that a variety of organizational patterns develops within the state to meet the changing needs of visually impaired pupils and the changing population.
8. Cooperate with college and university programs preparing state level resource consultants for teaching visually impaired children and youth by participating in seminars, arranging field trips to the programs in the state, and, in general, helping wherever possible.

USOE Consultant. In addition to these resource consultants, it is highly desirable that in the United States Office of Education the specialist in the education of visually impaired children and youth provide active leadership for state resource consultants. It would be very helpful for state resource consultants to have an opportunity to come together annually to be kept abreast of changing statistics with regard to causes of blindness and its incidence and prevalence, planned research studies, research results, emerging organizational arrangements, reports of new programs, and other matters of interest. An occasional visit of state department resource consultants by the USOE specialist could provide a better understanding of problems as they differ from state to state, and in varying organizational frameworks.

The program needs of visually impaired children are vastly complex for many reasons. Many of these factors are simply a reflection of the times in which we live, while others are more specifically related to the problems inherent in the visual disability itself and the resulting habilitative and rehabilitative efforts necessitated by reduced functioning of the primary sensory learning system of children.

Whether or not an adequate educational program for these children will continue to develop in an innovative and creative manner, utilizing new knowledge and techniques as well as tested traditional approaches, may well depend upon the emergence of the resource consultant as the program leader at the various needed levels.

The Role of Higher Education

Although good teachers remain the prime necessity for effective educational programing, the need for program leadership is becoming increasingly important. This type of leadership person is not quickly prepared and the availablity of sufficient numbers of resource consultants will depend in great part upon an expanded effort by universities in the designing and operation of adequate preparation programs for these consultative positions. Ideally, such training programs should be established at the educational specialist (sixth year) level and should include:

1. Course work directed toward insuring depth of understanding and proficiency in the education of visually impaired children. (At Michigan State University, for example, a degree candidate in this area is expected to be a master teacher of

visually impaired children and will hold a masters degree in this field.)

2. Course work or experience which provides some breadth of understanding of educational programing in the other areas of special education and in general education.
3. Course work which presents a working knowledge of the processes of learning, its application to children, particularly visually impaired children.
4. Course work presenting the practical aspects of supervision and those other areas of administration which are appropriate to the particular candidate's needs and objectives.
5. Practicum and internship experiences which give the candidate the opportunity for full time internship experience under an outstanding consultant in the area of the visually impaired. This experience should be at the level of operation (state, intermediate, local, or residential school) to which the intern aspires to work upon completion of the degree. Additional practicum (part time) placements should be made available at other levels and in other types of settings in order to present a well rounded view of the total consultant field in the education of visually impaired children and youth.

Candidates for degree programs (as described above) and for positions as resource consultants are not readily found because their availability is directly related to the total supply of professional persons in the education of visually impaired children. Therefore, if the planning, initiation, and operation of comprehensive quality programs for visually impaired children is to be a reality, the profession must take steps to initiate a total recuitment effort which will have a real impact upon the total numbers of personnel in the field. Fortunately, through Title III of PL 85-926, as amended, fellowships are available at some universities which offer sequences of courses for the resource consultant to qualified candidates whose profesional goal is that of resource consultant.

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3 / The Role of the Resource Consultant for the Hearing Impaired

HAZEL BOTHWELL

The resource consultant for the hearing impaired, whether at the state or local level, has a serious obligation and responsibility for bringing into proper focus the critical problems of hearing impairment in children, for influencing the development of urgently needed changes, and for assisting in the coordination of programs and services for hearing impaired children on a statewide basis. All states have certain resources for hearing impaired children and competent professional personnel, yet there are wide variations in educational programs and services for hearing impaired children within the different states. In general three different kinds of programs and services are provided: residential school programs, special education programs in public schools, and diagnostic and therapy services by speech and hearing personnel. Each of these programs and services is necessary if the needs of all hearing impaired children are to be met, yet in many states these programs function independently and there is only limited coordination among them. It is beginning to be recognized that unified planning among professional disciplines and agencies is essential if the unnecessary failure of hearing impaired children is to be alleviated.

The resource consultant in special education is in a strategic position to coordinate such activity. In many states, however, there are no consultants for the hearing impaired. At the local level, except in well staffed residential schools or individual programs in a few metropolitan areas, educational supervision or consultant service is practically nonexistent. Even at the state level, there are few educational consultants to guide the programs for hearing impaired children on a statewide basis.

The *Directory of Special Education Personnel in State Departments of Education* shows that only 10 states currently employ an educator of the deaf and hard of hearing in the state department. Two of these 10 consultants have responsibilities for other types of handicaps in addition to the program for the hearing impaired; in 14 states the educational program appears to be the responsibility of the speech and hearing therapist; two states include the hearing impaired under supervision of persons with varied backgrounds, and 24 states make no mention of the program for hearing impaired children. State departments employing educational consultants for the deaf and hard of hearing either on a full time basis or with shared responsibilities are California, Illinois, Massachusetts, Michigan, Minnesota, New York, Ohio, Oregon, Wisconsin, and Wyoming. In view of the serious educational needs of hearing impaired children across the nation, it seems imperative that state departments of education give major consideration to the employment of such consultants to assume responsibility for the development of comprehensive, coordinated educational programs and services on a statewide basis.

The plight of the hearing impaired child has been emphasized through numerous national studies and conferences. Among important contributions are *The Education of the Deaf—A Report to the Secretary of Health, Education and Welfare,* by his Advisory Council on the Deaf (Babbidge, 1965); the *National Research Conference on Day Programs for Hearing Impaired Children* (1968), sponsored by Teachers College of Columbia University and the Alexander Graham Bell Association for the Deaf; *Developing Reading Test Norms for Deaf Children* (1963) conducted by the New York Bureau of Educational Research and the Conference of Executives of American Schools for the Deaf; and conference reports in *Audiology and Education of the Deaf* (1965), sponsored by a joint committee established by the American Speech and Hearing Association and the Conference of Executives of American Schools for the Deaf.

It is of importance to note in the above reports that governmental agencies and national professional organizations have demonstrated their concern over the present problems of the hearing impaired. In these and other studies, problem areas have been clearly described. Their solutions, however, depend upon unified action at the state and local levels.

The role of the consultant in this respect cannot be overestimated. The consultant has the opportunity to accumulate information relative to specific needs within the state, to give leadership in the development of immediate and long range plans and policies for program improvement, and to assist in the mobilization of professional task forces necessary to the accomplishment of objectives.

Each consultant, whether in a local or state program, must be alert to problems which affect the education of hearing impaired children and also should participate in the solution of these problems in varying degrees according to his role and responsibilities. These responsibilities include various functions such as direct supervision and administrative and coordinative functions. Aspects of direct supervision can be carried out most effectively by a consultant in a local program; administrative or coordinative functions are primarily focused on the state level. In this chapter, major problem areas influencing the development of educational programs and services for hearing impaired children will be presented and the role of the consultant will be discussed, and action steps will be suggested. Following are four problem areas:

1. The need for an organized and effective program of identification and followup.
2. The need for proper educational assessment and ongoing evaluations of children in school programs.
3. The need for the development of comprehensive educational programs and services which can meet the individual differences of children.
4. The need for qualified personnel to implement and staff these programs and services.

Problem Area One: The Need for an Organized and Effective Program of Identification and Followup, and the Role of the Educational Consultant

Recognition of the Problem. The relationship of early identification to the educational success of the child with a hearing handicap is receiving considerable emphasis in current writings by educators, audiologists, linguists, and others. Linguists emphasize that the capacity for learning a first language is greatest between two and four years of age; they also stress that this special capacity for learning a first language decreases markedly after that time, possibly even disappearing altogether as a special capacity at about adolescence. Implications for the education of children with hearing impairment are obvious—both for very young children still at the optimal age for language learning and for hearing impaired children in our school systems who remain unidentified until after these crucial years have passed.

Identification alone is only one facet of the total process of an effective hearing conservation program. Of equal importance is the followup including the medical, audiological, and educational referral. Some states such as Michigan, California, and others have had well developed hearing conservation programs for many years, based on effective legislation, well defined responsibilities of participants, standards and procedures for conducting hearing testing programs, adequate followup procedures, and programs for the training of necessary personnel. Other states may be only beginning to face these problems. In one state serving over two and one-half million school children, a survey in which the consultant participated showed that of the 1,758 school districts reporting (a) over 50 percent did not have regular screening programs; (b) there were no statewide standards for the regularity or method of testing; (c) testing was done by individuals representing 10 occupations or combinations of occupations; (d) 21 percent of those responsible for administering the tests had no training; (e) two-thirds of the test equipment was not calibrated; (f) 10 percent of the respondents did not notify parents or physicians regarding children who failed the test; and (g) only one-third of the people making educational recommendations had any training in this area. Such information served to substantiate the need for a state hearing conservation coordinator to assume responsibility for the development of a statewide program of identification and followup. A close working relationship between the coordinator of the hearing conservation program and the educational consultant for the hearing impaired is imperative and can result in a dual attack on the problem.

Because of the invisible nature of hearing impairment, the child with a hearing loss is not readily identified without an effective hearing testing program. Even after identification of the child, the lack of understanding of the problem of hearing loss by parents, school personnel, and professional groups often tends to minimize the needs of these children thus causing unnecessary delays in educational planning which may result in school failure.

The importance of the medical aspects may be minimized or neglected, if it is not recognized that as much as 80 percent of permanent hearing damage can be prevented through prompt and adequate medical attention. Some audiological information and reports may tend to minimize the child's needs through the use of unexplained terminology such as "slight," "mild," or "moderate" hearing loss. When these terms are applied to children they are often inappropriate to the educational needs of these children. Other diagnosticians, because of their limited knowledge of the behavioral aspects of hearing function, may overlook or misdiagnose the child with a hearing impairment. This has been pointed out in an unpublished report from New York Children's Hospital Center where 60 percent of a group of children previously diagnosed as mentally retarded, emotionally disturbed, or aphasic were found to have unidentified hearing loss. Yet, in general, clearance of a child's hearing is seldom required prior to placing him in any special education program.

Professionals are only beginning to bring into focus the educational needs of the hard of hearing child. In Kentucky, a study of a group of 100 hearing impaired children in the regular classroom showed a total of 58 grades failed. In an Illinois community with 18,000 school children, a review of children's records showed a total of 121 children who had failed their hearing test, but had not been referred for educational followup. Of this group with bilateral hearing loss, 31 percent had repeated one or more grades. Information from the same state showed that of 102 counties within the state, 83 had no educational programs for hearing impaired children, nor was there an educator of the hearing impaired to assist in bringing into focus the educational needs of children with identified hearing loss or to assist in making educational recommendations. It seems of utmost importance that the educational consultant become directly involved in this educational process.

Following are several suggestions for action directed toward improved education of hearing impaired children through a coordinated program from identification to education.

Supervisory Responsibility

1. Devise a definite referral channel for special education followup as part of the local hearing testing program.

2. Develop an educational screening information sheet for children with identified hearing losses to be filled out by the principals or teachers.
3. Obtain further information in regard to school achievement, communication, and social adequacy on all children whose educational screening indicates this need.
4. Assist in making educational recommendations and placements.
5. Conduct programs and demonstrations to help school personnel understand the serious problem of hearing impairment in children and the relationship of hearing to learning.

Administrative Responsibility

1. Assist in pointing up the need for a statewide program of hearing conservation under the direction of qualified personnel, if such a program is not in effect.
2. Interpret these needs to appropriate school personnel, agencies, the state departments, and parent groups.
3. Develop definite regulations and policies for referral of children to special education for further study and educational placement.

Coordinative Responsibility. The major responsibility for administering a state hearing conservation program is often placed within the department of public health, the department of school health, or some other health agency. It is the responsibility of the consultant to:

1. Participate in interdepartmental planning to develop a total hearing conservation program—including educational followup.
2. Coordinate the educational aspects of the program with the total hearing conservation program.
3. Cooperate with other departments in the preparation of pertinent materials for lay and professional persons including articles, radio and TV presentations, video tape, and other communication media.
4. Coordinate the educational referral of children from clinical services and other diagnostic centers to the proper school facility.

Problem Area Two: The Need for Proper Assessment and Ongoing Evaluations of Hearing Impaired Children, and the Role of the Consultant

Recognition of the Problem. Based on national reports and also on investigations within states, it is realistic to mention that ongoing evaluations of children on a statewide basis leave much to be desired. In the majority of special education programs across the country, interdisciplinary clinical services on a continuing basis are not available. Waiting lists of seven and eight months for some services have been reported, and these delays result in inadequate educational planning for children.

At the present time many diagnosticians, including medical personnel and key school diagnosticians such as audiologists, psychologists, and speech pathologists, have had only limited opportunity to learn about the impact of deafness on children and, consequently, may make recommendations or predictions about the child's needs which are unrealistic and detrimental to his educational future.

There are wide variations in the individual differences and total needs of hearing impaired children. On a functional basis, the terms "deaf" or "hard of hearing" do not describe the child nor identify his individual needs.

Increasing attention is being directed to all children who have hearing impairment, with hearing losses ranging along a continuum from slight to profound. The literature reports identified problems in auditory discrimination and language development in young children with even slight hearing losses. One extensive study of the development of reading norms for deaf children from both day and residential schools showed that these children had a wide spread in degree of hearing loss ranging from moderate to profoundly deaf. As a group, however, their educational needs were severe in that children age 10 years, 2 months, had an average grade level of 2.4 in reading, and 16 year old children had an average reading level of 3.5.

There are undoubtedly many reasons for this limited educational success, not the least of which may be our failure to obtain thorough and continuing evaluations of children and to plan educational programs and instructional methods accordingly. Vitally important assessments of such aspects of learning as visual function, learning patterns and disabilities, and information about physical coordination are seldom a part of the teacher's knowledge about a child. There are also equally significant evaluations needed on a continuing basis regarding environmental factors of home, school, and community since these factors may be essential to the child's entire communication development and social adequacy.

Consideration of a profile rating scale on individual differences of children as proposed by Frisina (1967) would seem to have value to teachers and other staff members as an instrument for use in planning educational programs and in pursuing methods of teaching pertinent to each child. New approaches to educational programs and instructional methods might result if valid assessments of the total needs of children could be made available. One basic problem may be that special education programs for deaf children have little or no direct supervision by an educator of the deaf at the local level; therefore there is often no experienced person to point up the critical need for evaluation or to recognize discrepancies in diagnostic information.

Following are suggestions for action directed toward improved education through increased knowledge of the individual differences of children.

Supervisory Responsibility

1. Review the records of children in regard to recent and valid descriptions of their abilities and disabilities.
2. Obtain up to date evaluations by the audiologist, ophthalmologist, psychologist, social worker, speech pathologist, and others.
3. Obtain evaluations and develop procedures for ongoing assessment of school achievement, communication, and social adequacy.
4. Arrange for periodic interdisciplinary staffings relative to the child's progress.
5. Develop an ongoing parent counseling program.

Administrative Responsibility

1. Develop state policies that require specific and periodic evaluations by qualified diagnostic staff, if the program is to be state approved.
2. Assist in arranging regional evaluation facilities if necessary.
3. Develop state policies which would require local supervision of the educational program by a qualified and experienced

educator of the deaf and hard of hearing who could begin to identify areas of need.

4. Where there is no supervisor, require that a senior teacher be given these responsibilities for a reasonable period of time.
5. Accumulate information on shortages of diagnostic staff and facilities locally and statewide.
6. Initiate effective action plans at the state level for recruiting and financing necessary staff on a local and statewide basis.
7. Initiate workshops and institutes on deafness for school diagnosticians. Promote internships for new psychologists and social workers.

Coordinative Responsibility

1. Develop and coordinate information channels between diagnostic centers and school programs.
2. Develop and coordinate regional diagnostic staffings as necessary, utilizing all resources possible.
3. Coordinate two way communication channels between teachers and diagnostic personnel both within the school itself and between the school and outside facilities.
4. Utilize all opportunities for interdisciplinary participation through joint meetings or workshops.

Problem Area Three: The Need for Comprehensive Educational Programs and Services to Meet the Individual Differences of Hearing Impaired Children on a Statewide Basis, and the Role of the Consultant

Recognition of the Problem. The limited educational success of many hearing impaired children has been dramatically set forth in current literature. There is now an urgent need for unification of effort among professional personnel directed toward a full understanding of the relationship of hearing impairment to learning and to the emotional well being of children. Only through such unity between diagnosticians and educators can improved and coordinated educational programs and services for hearing impaired children be established.

As stated earlier, hearing impaired children who are receiving assistance at the present time are primarily in three types of programs—(a) those in schools for the deaf, (b) those in special education programs, and (c) those being served by speech and hearing personnel. In most states, well established schools for the deaf which children attend primarily on a residential basis have existed for many years, but during most of those years there were almost no programs for other hearing impaired children in local communities. In the last decade there has been a rapid increase of special education programs in local communities, but these programs have limited coordination with programs in schools for the deaf.

Special education programs established in metropolitan areas had the opportunity to develop strong educational programs and also to develop programs of experiential living in the home, school, and community. However, serious problems have been created across the nation by the establishment of ungraded classes in small communities: the limited number of children enrolled was not sufficient to permit proper grouping; continuity in the educational program was limited; qualified teachers could not always be obtained; and local supervision by an experienced educator of the hearing impaired was not available. In addition, few states had even one educational resource consultant in the state department of special education and therefore necessary consultant service was lacking.

Speech and hearing personnel provide both diagnostic and therapy services to hearing impaired children and such services may be in clinic facilities or in the public schools. Enrollments of children in each of the three types of programs probably vary considerably in each state. One state reports that it has about 450 children in its school for the deaf, about 1,800 in special education programs and classes, and about 1,000 additional children enrolled in therapy in the public schools. Each of these programs and services is necessary and probably in need of expansion if all hearing impaired children are to be served adequately, yet these programs frequently operate indifferently, without regard for the total needs of each child. The present need is for coordinated interprofessional planning.

The method of achieving the development of coordinated, comprehensive programs and services for all hearing impaired children on a statewide basis is a difficult matter. There seems to be general agreement that the child must have a sound educational program which can meet his needs as a hearing impaired child. He should be able to live at home, if at all possible, and he should have the opportunity to be a successfully contributing member of his school and community. Yet the low incidence of deaf children and the severity of the educational problem complicate this task.

Educators are now beginning to look forward to the kinds of comprehensive programs and services which need to be provided for hearing impaired children and to discuss plans for coordinated services. To be comprehensive, programs should probably include the following: (a) a program of early identification and diagnostic followup: (b) home visiting programs and locally based nursery classes for young children; (c) a continuing program of parent education; (d) centralized programs for children with severe hearing loss and educational needs; (e) a program for children in need of combined oral and manual instruction; (f) a network of resource rooms for hard of hearing children and itinerant or tutoring programs to include language, communication, academic instruction, and speech and hearing therapy; (g) a complete educational diagnostic service and ongoing evaluation of children; (h) academic, prevocational, and vocational counseling with inschool and parttime work study experience in the community; (i) the use of new instructional techniques, materials, and equipment; (j) mobility within this framework according to the changing functional needs of hearing impaired children; and (k) a program of basic and applied research with continuous evaluation of the efficiency and effectiveness of the program. In addition, special programs must be developed for children with multiple handicaps in addition to hearing impairment. The total program should be under the direction of a highly competent and experienced educator of the deaf and hard of hearing.

In some states, the above programs are beginning to be developed through extension of services from schools for the deaf, in cooperation with special education programs in local communities. In other states which have more than one school for the deaf, such coordination with local programs might cover most of the state. In still other states where special education is well established and where geographic factors permit, programs are beginning to be established on a regional basis either in metropolitan areas where all children can live at home or in large multicounty regions around populated areas. In these programs most children go home daily and all children go home weekends.

Basic to such a program is a complete staff of teachers, supervisors, ancillary personnel, and diagnostic staff. Facilities should include all those necessary for hearing children and, in addition, special features necessary to the child with impaired hearing. Implementation of such plans on a statewide basis would require major adjustments in present programs within almost any state. State department rules and regulations governing approved programs would probably need revision in order to stimulate immediate necessary changes, and to establish a workable framework for long range planning. Comprehensive planning would also necessitate interagency and interdepartmental activity and possibly even a clarification of the role and responsibility of each.

In any event, if the total needs of all hearing impaired children are to be met, it is obvious that the educational leadership must be given by a person or persons with a comprehensive view of the problems throughout the state and responsibility for effecting change. Thus the role of the consultant comes into full focus.

Following are suggestions for action directed toward developing coordinated, comprehensive programs and services for hearing impaired children.

Supervisory Responsibility

1. Participate in this reconstruction program by identifying the problems such as limitations in the programs of identification, in diagnostic and evaluative services, in the educational program, and in qualified personnel.
2. Interpret the needs, suggest solutions, and obtain support for effecting change.
3. Initiate a program to upgrade the present instruction through inservice meetings of teachers to work on curriculum and other facets of education.
4. Utilize new techniques and materials and experiment in developing others.
5. Stimulate innovative ideas in team programing, experience teaching, and child initiated projects.
6. Investigate and use new technological equipment for auditory education, visual speech, and other aids.
7. Arrange ongoing programs of parent-child participation and education.
8. Coordinate these activities with other features of the total educational system.

Administrative Responsibilties

1. Interpret to the proper authorities critical needs and plans for the development of quality programs.
2. Effect changes in school law or state policy to promote the development of quality programs for hearing impaired children particularly in regard to minimum size of programs, required supervision, evaluations of children, and qualifications of teachers.
3. Initiate action toward long range development of quality programs with built in steps and time limits.
4. Study costs of programs and reimbursements necessary for quality education.
5. Promote inservice summer institutes, workshops, and field experience for teachers and participating diagnostic staff.
6. Assist local programs as much as possible either personally or through utilization of other available personnel.
7. Form state committees to assist in developing policies and procedures necessary for effective programing and coordination of programs and services on a statewide basis.
8. Utilize all resources and consultant services within the state department such as those in curriculum, vocational education, adult education, school recognition, educational media centers, and educational TV.

Coordinative Responsibilities

1. Explore services of agencies and plan effective utilization of all services.
2. Coordinate educational or diagnostic services among special education programs, speech and hearing services, and state residential schools.
3. Participate in the development of a coordinted plan of comprehensive programs and services in conjunction with such departments as public health, child welfare, mental health, and vocational rehabilitation.

Problem Area Four: The Need for Qualified Personnel to Implement and Staff These Programs and Services, and the Related Role of the Consultant

Recognition of the Problem. How to obtain well qualified staff in sufficient numbers is a major factor in the expansion of needed programs and services to the hearing impaired. Here again the consultant at either the local or state level plays an important role in the preparation of teachers.

Teacher preparation has been stimulated in the last few years through the allocation of federal scholarships, and increasing numbers of teachers are now graduating. However, in many colleges and universities across the nation, the quality of teacher preparation is limited by shortages of professional staff, inadequate facilities for student teaching, and limited numbers of master teachers for critic teaching.

Teacher preparation is the responsibility of the college or university. It is necessary, however, that an open door policy exist between the training center and the school programs for hearing impaired children. In states that are developing comprehensive programs, it seems essential that the teacher preparation programs include professional experience for students in both residential schools and special education programs.

While there have been national curriculum standards for many years, most states are only beginning to develop certification standards which are appropriate to the teacher of the hearing impaired. Changing needs in educational programs and new concepts in both general education and in the education of the hearing impaired make it necessary that continuous study be given to this matter. Current educational trends such as infant and early childhood education, increased attention to the hard of hearing child, the development of multitrack high school programs, adult education, and other areas suggest the need for specialization in addition to the basic curriculum. Advanced graduate preparation of supervisory personnel is of major importance to the development of necessary competencies for persons in positions of responsibility.

In addition to the shortages in educational staff, there is a serious need for an increased number of well qualified diagnosticians. Key persons are the school psychologist, social worker, and audiologist. Opportunity for these diagnosticians to obtain experience with hearing impaired children in an educational setting prior to employment is being provided in some states through supervised professional internship.

Following are some suggestions for action directed toward improved and accelerated teacher preparation and professional staff.

Supervisory Responsibility

1. Encourage a two way working relationship between the school program and the university teacher preparation centers.
2. Provide experiences for students on a developmental basis during their entire training period.
3. Work to establish supervision of the student teacher as a professional responsibility and adjust other duties accordingly.
4. Plan conference meetings with the university coordinator and the supervising teachers.
5. Prepare videotapes of classroom teaching to be used for study and discussion.

Administrative Responsibility

1. If needed, form an Advisory Council for the Preparation of Teachers composed of coordinators of university programs for the hearing impaired and the heads of the school programs for the hearing impaired.
2. In cooperation with the advisory council, develop standards for curriculum, for student teaching, and for the university facility.
3. Obtain state department endorsement of the above standards for qualified teachers, and support these standards through financial reimbursement to local school programs employing approved teachers.
4. Develop statewide recruitment programs at the high school and junior college levels.
5. Assist in planning statewide professional meetings and activities such as conferences for supervising teachers, meetings with The Student Council for Exceptional Children, and others.

Coordinative Responsibility

1. Coordinate the activities of university centers with local programs on a statewide basis.
2. Coordinate state department resources with university programs, such as the use of educational TV, blackboard by wire, and other new teaching equipment.
3. Coordinate student preparation with policies for local programs, such as required supervision and programing.
4. Coordinate standards of the advisory council on teacher preparation with standards of state certification boards.

It is apparent that despite the many critical problems still unsolved, solid progress has been made in the last few years in bringing into perspective the problem of hearing impairment in children. The impact of national conferences and research studies is now being felt within states.

Federal legislation and the establishment of the Bureau of Education for the Handicapped have now made it possible to finance the development of new and innovative programs. States have now submitted plans under Title VI for the development of critically needed programs for their handicapped children.

Through such state and federal emphasis it is now possible for special education across the country to assume its full share of responsibility for the education of children with hearing impairment. The educational consultant for these children will play a significant role in the development of quality programs and in bringing into focus the relationship of hearing to learning and to the school success and emotional well being of all children.

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4 / The Role of the Resource Consultant in Educational Planning for Emotionally Disturbed Children

PETER KNOBLOCK

The very fact that The Council for Exceptional Children has focused on the need to conceptualize this particular role definition lends encouragement to those workers currently involved in anticipating and planning adequate programs for emotionally disturbed children. To some, the emphasis on resource consultants in administrative, supervisory, and coordinative capacities may seem a premature focus, but the growth of programs, concepts, and training facilities has far exceeded relatively recent expectations. In a field so multidisciplined and populated by professional workers with diverse training and philosophies, it is to be expected that the nationwide development of educational programs would not follow an orderly and systematic path. As will be seen in this chapter, the urgency involved in the creation of the role of resource consultant will be a function of a number of interrelated dimensions, ranging from the size of the school district to the mental health climate within districts and regions. The recurrent theme will be one of the need to come to grips with the particular design which school districts wish to evolve, and administrative, supervisory, and consultative functions will tend to follow in a more or less logical sequence.

For the past six years discussions within this specialization and between groups of educators and other professional workers have continually emphasized the newness of the field. Many workers long involved in the education of disturbed children look with chagrin upon discussions which seem to indicate that as the field develops year after year, more and more individuals—both professional and lay persons—continue to ignore previous developments and experiences. In short, what appears to be happening is that many workers are discovering the value and even existence of concepts dealing with the education of disturbed children. This could account for the fact that with each passing year of being in business, so to speak, the field is thought of as newer and newer.

Although when viewed along a time dimension this area may be considered to be a developing one, the newness repeatedly alluded to may reflect the recency of concepts applicable to this field. When one considers the interdependency of concepts utilized by special education, psychology, and elementary education, the scope of the problem becomes clearer. Areas of development that are so dependent upon both the behavioral sciences for concepts of understanding and programing for behavior and also upon innovations in curriculum must either strike out on their own or await developments they consider promising and then make appropriate adaptations. Up to this point in our development, it would be safe to say that we have tended to sift the myriad concepts available to us in general education or to uncritically adopt new ideas without thoroughly conceptualizing the possible implications.

In discussing just how new this programing area is, we could point to the small number of teachers involved in teaching emotionally disturbed children on a nationwide basis. Of course, one must look behind this to the very few state certification patterns and in turn to the scarcity of thoroughly developed university training programs for teachers of emotionally disturbed children.

Further, the need for resource workers in this area may well have been retarded by the paucity of public school special programs in terms of scope and numbers of children served. Other reasons which account for the lack of emergence of such leadership personnel may revolve around the strategic and serious question of how best to divert "front line" personnel from classroom teaching. On the assumption that the majority of resource consultants will come up through the ranks, the issue is one of justifying the loss of many good classroom teachers from contact with children.

One interesting facet of the above statements, all of which may have contributed to the slow development of broader role definitions of workers in this area, is that the very same statements could now serve as arguments in favor of utilizing resource consultants.

In this chapter's attempt to discuss the role concept of the resource consultant, the emphasis will not be on traditional supervisory or administrative approaches. Rather, an effort will be made to think of the resource consultant as a leadership person whose specific charge is to involve himself in the teaching learning process as it applies to the education of emotionally disturbed children. His duties will typically be conducted outside of the classroom and he may take on any number of administrative, supervisory, or coordinative functions. As indicated earlier, the ingredients making up this role will vary considerably, depending upon a number of local and regional factors. An effort will be made to spell out possible ramifications of particular functions.

Dimensions Influencing Role Definition

Size of School District. Typically, large metropolitan school districts which embark upon programing for disturbed children rely on patterns already institutionalized within their district. Most characteristically, new programs or plans are welded onto existing special education programs. Following this pattern, then, personnel drawn to a program for emotionally disturbed children most likely come from these other special education programs, since there are relatively few numbers of newly trained personnel entering this field. In a majority of instances this mitigates against the creation of a particular role definition such as "resource consultant" since any person assigned such a task normally brings with him other duties. It is indeed rare for a community to have special education personnel focus on just one area, such as educating emotionally disturbed children.

As a group, smaller suburban school districts of under 30,000 pupils are not even likely to provide an administrative structure for special education in any area. This is not to say that services are not provided, but it is unlikely that provisions such as special classes are brought together within some unifying framework. In many instances the curriculum and supervisory personnel for the primary and intermediate grades are the ones with some responsibility for any educational provisions, at least on the level of curriculum. A very common pattern is for the administrative responsibilities to fall upon the school psychologist or a member of a pupil personnel group. Since it is unlikely that such workers have clearly delineated supervisory responsiblity for existing special education provisions in their district, it would follow that any program for emotionally disturbed children would stand alone in a compartmentalized fashion.

Type of Mental Health Climate. Although it is an extremely difficult aspect to measure, there is general agreement that the mental health climate of a district greatly influences both the direction and the spread of programs for emotionally disturbed children. The difficulty of measurement is further compounded by the covertness of many attitudes.

In this writer's experience, problems stemming from this factor are more often seen in what is omitted from programs rather than in what is included. For example, one of the more common dilemmas is the reluctance on the part of school personnel to consult and confront parents of children who may actually be receiving special programing assistance. The anticipatory belief is that such programing would meet resistance and therefore confrontations are to be avoided. Some districts are hampered in their efforts by partial evaluations of children for fear of going too far in terms of infringement of rights. These may be dramatic examples, but certainly the subtle directions in which programs may head are often determined on the basis of congruence with the mental health attitude of the community.

Proximity to Universities. The importance of this dimension is only now becoming apparent. The most visible result has been the recruitment of trained teachers of emotionally disturbed children by communities located in and around university training programs. Of far greater significance is the potential flexibility in role definition that such teachers and workers may be allowed. For example, those interested in investigating the efficacy of trained teachers functioning as crisis teachers (Morse, 1966) on full or parttime basis could look to communities located near the University of Michigan and Syracuse University, to name just two examples. Creative programing involves the impact of ideas as well as personnel, and some universities have been willing to serve in the capacity of feeding information and providing professional support for new approaches enacted by public school districts.

Centralized or Rural School Districts. With the exception of a few rural districts, programing for emotionally disturbed children has not been attempted to any great extent. The role definitional problems of a worker engaged in such a district are not clear at present. One factor influencing the creation of new roles is the frequent lack of clarity as to lines of responsibility for such programing. Frequently, the geographic boundaries are so large that the psychological as well as physical limitations of effective communication with agency and community resources and with parents impede the rapid development of programs.

Recruitment of Personnel. A final dimension which would certainly influence the role definition of a resource consultant is the reality issue of available personnel in a district and the "pull" of a district—the ability to attract trained workers. Many districts seem to be caught in a rapid increase of programs and services without an appreciable increase in personnel. Typically, a few stalwarts in a district find themselves responsible for decisions which they may or may not have the explicit power to make.

Designs for Utilization of Resource Consultants

Curriculum Supervisors as Resource Consultants. It is envisioned that an increasing number of school districts will acknowledge the large number of children identified as emotionally disturbed in regular classrooms. An upsurge in the critical evaluation of special class programs has given confidence to many professional workers whose interest has long been in devising and adapting large group approaches for working with emotionally disturbed children such as those found in regular classes. With predicted balancing of the pendulum between a focus on special class and on regular class programs, it is logical to conceptualize the curriculum supervisor and resource consultant as nearly synonymous. The advantage is that the concept of an entirely new professional worker could be avoided by broadening the present curriculum supervisory role to encompass emotionally disturbed children.

Defining the curriculum consultant's role in this way would enable districts to focus the consultant's attention on supervisory functions to the exclusion of making administrative and policy decisions. Principals of buildings in which special programs are housed are almost unanimous in their interest and concern for assistance to classroom teachers. One of the paramount problems to be faced is the teacher's reluctance to handle problem children in the classroom when specialized personnel with competencies in this particular area are introduced into the school system.

By divorcing the curriculum person's role from administrative functions we assist him in presenting a clearer image to those with whom he must work. Up to the present time, such a professional worker had no specific part to play in special class programs unless specifically invited. The rationale for extending his sphere of influence revolves largely around the belief that we are dealing with a curriculum continuum for all children. Specifically, this means that there is much of value in regular curriculum approaches which can be adapted to classroom instruction with emotionally disturbed children. The converse would also have to hold true—namely that the techniques and concepts developed with specialized groups may have implications for instruction in regular classrooms.

It is envisioned that the curriculum consultant functioning as a resource consultant for *all* children could encompass the following activities:

1. Evolve a systematic and ongoing orientation approach for first year teachers in the school system.
2. Function as the leadership person in the development of instructional and resource centers in each school. Such centers would serve as repositories for the accumulation of materials and supplies which either have been proven effective with this type of child or which hold some promise for experimentation. This person is in a strategic position with respect to dissemination of new instructional materials to school staffs.
3. Enhance the opportunities for communication between special area personnel such as librarians, physical education staff, music and art personnel, and those regular and special class personnel concerned with instructional problems of disturbed children.

Trained Special Educators as Resource Consultants. With the rapid expansion of university and college training programs in the education of emotionally disturbed children, a slow but steady buildup of personnel trained in supervisory capacities has begun. Typically, such individuals have had classroom experience with normal and disturbed children.

In contrast to the utilization of already existing curriculum supervisors described above, bringing in trained special education personnel should allow for a role definition which would encompass both administrative and supervisory functions. Typically, directors and supervisors of special education are responsible for several specialized areas and are not always in a position to adequately focus on administrative and supervising functions in individual areas.

The resource consultant would function as the single person most knowledgeable in programing for disturbed children and would provide the overall director with the necessary information for comprehensive special education planning.

Administrative functions would include:

1. The decisions as to actual format and development of programs within the individual schools (this might conceivably entail the identification of appropriate personnel within schools or within the district to assist or actually implement programs).
2. Further policy decisions would include the proper timing and introduction of programs and services as well as the staffing and support or backup procedures for teachers.
3. The ongoing evaluation and supervision of personnel and programs, including the opportunity to initiate and/or support necessary changes or modifications.
4. The development of usable data collection forms, such as referral forms, clinical records, and classroom observation procedures for both pupil and pupil teacher interactions.
5. The initiation or further development of organization which would include the allocation of sufficient personnel time to guarantee systematic procedures.
6. Active development of meaningful inservice training approaches. It is in this broad area that many exciting possibilities await our scrutiny. The potential impact of supportive and reality oriented inservice training approaches would seem to warrant a large segment of the resource consultant's time and energy. Inservice training provides opportunity to effectively use the relatively few trained workers in the field.

Philosophy of Inservice Training

It would seem essential for any inservice approach or approaches to have a clearly articulated philosophy and set of goals.

Many points of view have merit, to be sure, and the following are merely set down as items for discussion and possible modification.

1. Large numbers of children present academic and adjustment problems while in the school situation. Some children clearly pose problems to the administration of school routine and practices, while others have turned their feelings inward and present more of a problem to themselves in terms of lowered self esteem and diminished skills for effectively coping with their feelings.
2. The identification and segregation of these children offer us only a partial answer to the problem. The high incidence of adjustment problems coupled with the range of problems, many of which defy diagnostic labeling, argues in favor of designing an inservice approach which would eventually reach out to the majority of staff members and children in the system.
3. The primary goal of an inservice approach should be to enhance the skills of an already competent group of professional workers. The assumption is that such workers are actively seeking ways in which to maximize their own functioning as well as to increase the relatability of the children with whom they are concerned. An inservice approach would offer such personnel an ongoing forum in which they could share their ideas and profit from the efforts of their colleagues.
4. Directly following from the above statement would be the need to develop *active* or problem solving approaches as opposed to a more passive orientation of training.

Patterns of Inservice Training

Pattern I. Participant Observer Approach. This approach utilizes the services of a participant observer who functions with the active participation and support of the classroom teacher.

Step 1: A classroom teacher identifies a child who has presented learning or management problems or with whom the teacher has had particular success.

Step 2: The participant observer spends an appropriate amount of time in the classroom observing the child's behavior and the teacher child interaction patterns.

Step 3: The above step is repeated in several other classrooms in the same school building.

Step 4: Regularly scheduled luncheon meetings are held in the school with the participant observer and the classroom teachers involved. Attention is focused on the children under consideration.

The ultimate goal is that attitudes, techniques, and approaches will generalize to the situations of other children in the classroom whose behavior may be similar.

Pattern II. Initial Assessment and Participant Observer Approach. This approach differs from Pattern I in one significant aspect, namely in the active collection of information prior to the observation and discussion of individual cases.

Step 1: Information obtained from a child's classroom teacher, school counselor, and family is organized and presented to the participant observer or observers in advance of a meeting with other personnel.

Steps 2, 3, and 4 as indicated in Pattern I are followed in this pattern.

Pattern III. Child Study Meetings. This approach differs from the first two patterns in that more active control, organization, and direction rests in the hands of school personnel.

Step 1: Interested and qualified classroom teachers from each or representative schools in the system are selected to serve as group leaders.

Step 2: The group leaders then undergo a period of training, preparing them to direct small group discussions in their individual schools.

Step 3: The preparatory training of group leaders is conducted by an outside consultant and/or utilizing specialized school personnel in administration, counseling, and curriculum.

Step 4: While it is assumed that the preparatory training of group leaders is generic in nature—that is, concerned with developing basic skills in mental hygiene and the education of emotionally disturbed children—there is good reason to expect that the individual group leaders may wish to focus on particular aspects in their schools such as curriculum adaptations, classroom intervention techniques, etc.

Pattern IV. Didactic Courses. This approach, already being followed in other subject matter areas, could be implemented on a regular basis; i.e., it could be offered once or twice each school year. The course would be available to any interested school worker.

Pattern V. Seminars for Specialized Personnel. Under this approach, seminars would be offered to one particular group at a time, such as providing a seminar for principals or guidance counselors.

A variation of the above would be to offer specialized seminars for specified groups of personnel. For example, curriculum supervisory personnel could work with small groups of teachers aiding them in this one area as it involves emotionally disturbed children.

Pattern VI. Inservice Training in Pilot Project Schools. In this pattern, any one or a combination of the first five patterns can be employed in certain schools which are selected as pilot project schools. This would serve the purpose of sensitizing that school's personnel to the problems and skills required in designing educational approaches in their school. The hope is, of course, that the chances for success of a pilot project would be enhanced by an ongoing inservice program in that school.

Supervisory functions would include, in addition to those mentioned in connection with curriculum supervisors, the following:

1. The clear articulation of a philosophy of educating emotionally disturbed children which could be communicated to all school personnel including regular classroom teachers and high level administrative and decision making personnel ranging up to school superintendents and boards of education. The need to specify goals of specialized programs and the overlapping responsibilities of regular class teachers and specialized personnel should be pointed out.
2. The fostering and actual implementation of a research climate within the school district. All of the ramifications of a research orientation are not clear, but the many obstacles frequently encountered have brought us closer to an understanding of some of the pitfalls experienced in designing a research program or stance. Some resolutions must be made as to the need for secrecy versus openness of the data collection and goals. While there is value in strengthening experimental controls of variables, the cloaking of many projects in secrecy

despite the almost frenetic search of many researchers for data within programs creates marked feelings of teacher estrangement. Some compromise needs to be made, and it may take the form of attempts to translate research findings, even in preliminary form, into classroom practice.

Coordinative Functions as a Joint Effort of the Resource Consultant and Director of Special Education

Reality conditions would seem to delimit the coordinative function of a resource consultant. By role definition, the resource consultant is seen as a professional worker who gets caught up with many front line problems such as inservice efforts, curriculum adaptations, screening, and identification procedures. Coordinative functions imply a broad view of program planning both within the school system itself and in the school's planning with community agencies.

It is expected that the resource consultant would provide the director of special education with the necessary information in an effort to accomplish the following goals in terms of coordinative functions:

At Local School Level	*Within Community Framework*	*On State, Regional, and National Levels*
Represent special education program to policy makers within school hierarchy. Interweave special program for emotionally disturbed children with total special education program. Interpret special program to regular school staff.	Plan for utilization of community agencies, both as service components for the special program and as an extension of schooling (placement of school programs in community facilities). Act as the school's liaison with organized mental health bodies—both governmental and lay groups. Aggressive plan for the creation of a spectrum of services and programs for disturbed children.	Interpret implications of state and national legislation to local personnel. Utilize federal funding provisions to meet local needs. Seek to develop a viable regional plan to more adequately utilize area personnel and community and county services.

Summary

An attempt has been made to make a leadership role operational in designing and maintaining public school approaches to educating emotionally disturbed children. While this role has been labeled "resource consultant," the title is of less significance than is the creation of clear communication lines for evaluation, planning, and ongoing supervision of programs, school personnel, and children, all of which are involved in a reciprocal learning relationship.

Several dimensions considered to be influential in defining the role of a resource consultant and two role designs for utilization of resource consultants have been discussed. Two observations should be apparent to readers of this chapter. First, no resolution has been attempted to determine which of the two role designs would be most acceptable. The dimensions discussed are issues which must be recognized as real and as directly affecting the day to day as well as the long range functioning of resource consultants. The way in which these dimensions are viewed and dealt with on a local level can provide evidence for the precise role definition such a person could carve or design within that system. Second, no model for viewing the behavior of children or the operation of a program has been presented, since it is this author's impression that the kinds of supervisory and task related functions which have been discussed in this chapter are generic in that they would be applicable within most, if not all, conceptual or operational orientations.

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5 / The Resource Consultant in Mental Retardation

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The educator or social scientist who has made mental retardation his special interest and study may choose from a smorgasbord of jobs and roles. The recently increased visibility of mental retardation as a social problem is reflected in the concerns of public and private agencies across the country. For example, as one facet of a six point program to provide better services for retarded citizens, the Division of Mental Retardation of the Social and Rehabilitation Services Administration of the US Department of Health, Education, and Welfare asks for "A mental retardation specialist, either full time or parttime, in every generic agency of any size or significance [Jaslow, 1967, p. 5]." A generic agency is defined as "any health, welfare, educational, rehabilitative, or employment agency in the community whose purpose is not for the specific care of the retarded [Jaslow, 1967, p. 2]." Noting the shortage of trained manpower and the existing competitive situations, Dr. Jaslow (1967) emphasizes the need for coordination of services among all the generic agencies and the specialized groups serving the retarded.

The school system is obviously the one generic agency which reaches into the personal lives of all citizens. As legal statutes increase the span of years for compulsory school attendance and mandate services to *all* children, the problems of providing appropriate education for handicapped children proliferate and the need for more specialized support personnel is expressed by general educators. The specialist in mental retardation now faces increasing challenges and opportunities which are not restricted to working with small segments of the school population, but are related to the whole of the school, community, and society.

Specialist in the Schools

The role of the mental retardation specialist is distinguished from that of the director of special education or pupil personnel services in this discussion. As conceived herein, this consultant would have advisory responsibilities to general school administrators and to special education administrators and would work cooperatively with other school personnel and professional and nonprofessional representatives of the community. The mental retardation consultant might give full time services to one large school system or might be employed by a number of adjacent school districts in a cooperative program. Other arrangements are possible: for example, the services of such a specialist may be shared by the schools and public and private institutions, e.g., social welfare departments and employment and rehabilitation agencies. The scope and flexibility of the contributions are great, depending on the state and community leaders' resourcefulness and the availablility of a consultant with knowledge, skills, energy, and readiness to develop the service role as described.

Preparation for the Consultant Role

The academic training and experience of the mental retardation specialist may largely parallel the basic preparation of the special education director. The professional level of education for administrators has been treated extensively by Blessing (1967), Connor (1966), and Henley (1967). Major areas of concern for administrative competency are delineated in the monograph *Professional Standards for Personnel in the Education of Exceptional Children* (The Council for Exceptional Children, 1966). The consultant in mental retardation will have had a major in depth study of mental deficiency, including elements from the fields of medicine, individual psychology, and sociology.

Because of the social concern and the number of retarded individuals involved, the consultant whose work reaches into the whole community must be prepared to provide: (a) a strong public relations role, (b) leadership in planning for and adapting to new programs in various stages of development, and (c) grantsmanship—knowledge of where and how to obtain financial support and how to prepare proposals acceptable to funding agencies. An important part of the education of the mental retardation consultant is direct experience with mentally handicapped persons, e.g., classroom teaching, internship in service agencies, or practicum assignments. It may also be assumed that the person who chooses as a career to work in the interests of the retarded must be convinced of the worthiness of his efforts.

Relation to Special Education

As part of the special education team, the consultant in mental retardation works with the director, possibly more extensively than do any of the other area consultants. Children designated as mentally retarded comprise a large proportion of those identified as handicapped. Special classes for the educable mentally retarded are more numerous than those for any other handicapping condition, and the recent addition of classes for the trainable mentally retarded has widened the scope of the responsibility. The director of the department of special education may or may not have had extensive training and background in the area of mental retardation. Many other areas of responsibility in addition to the administrative and management duties must absorb the director's time and attention. The professional assistance of the mental retardation consultant relates to all areas of the program for the retarded —planning, budget, personnel, supervision, and curriculum development.

Planning. When the specialist in mental retardation is added to the staff, his first interest will be the assessment of the status and the climate of the school community with regard to mentally retarded pupils; consequently, he may seek answers to such questions as:

1. What is the board of education policy, in records or otherwise expressed forms, regarding education for mentally retarded in this community? Examination of policy may reveal well stated intentions but lack of space, personnel, and budget. Or the opposite condition may prevail: reasonably well planned services in operation, but outmoded statements still on records.
2. What is the line of administrative controls in regard to special education services? Who has authority to make placements and transfers or obtain ancillary services as needed by the retarded pupils? How does the school principal share these responsibilities?
3. What persons are responsible for "quality control" of programs offered? Who makes decisions on the crucial aspects of room locations, equipment, and supplies?
4. How is the teaching staff recruited? Who makes judgments on

the effectiveness of the teacher in the special classes?

5. What assistance is given to school principals in regard to the special problems encountered when classes for retarded pupils are included in their buildings?
6. What is the out of school (i.e., community) climate and what conflicts are currently being expressed? Are classes for trainable retarded being sought? Are employment opportunities for retarded adolescents available?
7. How do the provisions being made by this school system stack up with state laws and regulations? Are there waiting lists for diagnostic services and individualized program planning?

Such determination of the status quo will give signals for direction in determining most needed immediate action. The resource consultant will need to work with key people in the administrative hierarchy to develop directions of change. The consultant may find the initial areas of effort to be along such lines as: (a) planning with those working on construction of new schools for including specific unit designs for the specialized program for retarded youth; (b) meeting with other supervisory personnel who have some responsibility in programing for the retarded to examine current procedures; (c) establishing close communication and easy interaction with personnel who assist in diagnosis and assessment—psychologists, social workers, and medical specialists; (d) visiting and assessing existing programs to make recommendations for obviously needed changes; (e) developing services in areas of urgent need, possibly including recommendations for new classes, new kinds of services, additional personnel, etc.; (f) examining all existing lines of procedures regarding testing of pupils, placement, recording, evaluation of pupil progress, and transfers to other programs in or out of special education.

Supervision. A school system large enough to employ a full time consultant in mental retardation will contain hundreds of pupils who are receiving special education services. Other personnel such as coordinators and helping teachers may be giving direct assistance to teachers of special classes. The consultant will be expected to plan and schedule such supportive service activities, frequently giving his own time to consultation with coordinators and teachers in groups or as individuals.

The consultant needs to keep in view: (a) keeping continuously open lines of communication so that problems expressed by teachers can be quickly brought to attention and constructive remediation; and (b) setting up adequate evaluation procedures for all pupils, via progress reports and reexamination, as indicated, to ensure that signals will be given when changes are needed. Teachers need guidance in long range planning, since they cannot be expected to know about all the possibilities of the total program in the system. The coordinator or consultant helps develop objective criteria for decision making, such as determining when a youngster is ready for a work experience program or when he would gain more in another environment in which social skills rather than abstract learnings are emphasized.

Teachers welcome guidance in their responsibility of working with parents. The consultant assists with the instigation of special report cards and helps plan for routine and special conferences, such as when a major change in program is to be recommended for a child. The supervisor will make sure that there has been adequate advance consideration and planning, and that other personnel, such as social workers and psychologists, have shared in decisions and recommendations.

A major concern of the supervising consultant is staff morale. He plans, through meetings, staff development programs, and written communications, to bring the staff of special teachers into an interacting, supportive group in which they can share mutual interests and problems. At times, individual difficulties can be alleviated in group discussions. Staff morale depends on feelings: "I am not alone; someone is available to help. What I am doing is worth doing, and I can do it well, or better, than ever."

To raise the level of professional competence of a teaching staff, constant attention is given to improving teaching technology. New research findings must be first reported, with implications discussed, before planning and practical testing can occur. Reasons for failure must be assessed and objectivity in viewpoint maintained, lest good ideas be tossed aside too quickly. Improvement of skills involves continuous reassessment and learning. The consultant provides such opportunities through inservice programs for all teachers, but he also encourages participation in special workshops, summer programs or institutes, visits to other programs, and membership in professional organizations.

There is no substitute for a comfortable relationship between consultant supervisors and individual teachers. Brief visits to classrooms, direct conversatons (longer discussions when possible), and personal acquaintanceship build the rapport necessary for a constructive relationship. Teachers too often say, "Mr. ——— has never stepped inside my room. I wish he'd been here yesterday." A supervisor should be seen often where the children are. The most skillful and effective teacher can be unintentionally overloaded with an impossibly explosive combination of emotionally disturbed retarded children. Inevitably some classes contain heterogeneous personalities and difficult behavior problems. Grouping pupils for advantage, controlling class size, and reassigning some pupils are serious concerns for the administrative supervisor (who may be the resource consultant).

Help for teachers in sparsely populated areas calls for modification of the usual visiting and inservice programs. Televised and telelecture programs have been used to reach a widely scattered group with common interests and needs. With the development of some mobile units to carry resource materials and a loan library of professional books, a new service has been added for teachers.

When supervision of special classes is assigned to a building principal, as must be done with respect to routine matters such as records, attendance, and general conduct, the supervision of the program can create conflicts. The consultant gives assistance to both principal and teacher. Problems may arise concerning discipline and behavior, supplies and equipment, responsibilities the special teacher is expected to assume for other building duties, or the kinds of assistance she may need which appear different from the needs for other teachers. Most likely to cause concern are supervision during lunch period and playground activities, transportation arrangements which bring the special class pupils to school too early or too late, and school events and activities in which the inclusion of the special class seems disrupting because model behavior is not constant. The consultant can work directly with the principal and other school personnel to modify arrangements and create understanding. It can be observed that normal children can often accept and accommodate to the problem children more readily than staff members expect.

Personnel. The recruitment and employment of teachers for the program will be of major importance to the consultant, since there is a great shortage of teaching personnel available or presently working in educational preparation for the field. The personnel department of the school system may ask for help in recruitment and decisions. The consultant and director of special education may be asked to make judgments on the advisability of employing persons not fully certified by state standards on a substitute or provisional basis. Such persons can be helped to become fully qualified but may require more assistance in program planning. Other workers, such as classroom aides or lunchroom or playground monitors, are sometimes employed. Community volunteer programs can be supportive if the school accepts responsibility for giving some direction and training. The consultant can work closely with the building principal and other staff members to bring about acceptance of nonprofessional workers within a school setting.

Curriculum Development. Curriculum or program guides are continuously in process of development or revision in local schools and in state departments of special education. A great deal of time and thought goes into this work, and consultants are expected to take a leadership role in organizing for the planning and preparation and in getting the final product into print. Several factors need to be taken into account:

1. As more state developed guides have been published, the necessity for locally prepared guides has lessened. Communication with the state department precedes local planning.
2. Curriculum guides from other states and schools are now easily available to anyone who desires copies through the Educational Resources Information Centers (ERIC) network. Copies are obtained by ordering from the ERIC Document Reproduction Services. Further information on this service and the specific items available can be obtained from the CEC Information Center, a project of The Council for Exceptional Children.
3. While good curriculum guides already published can be adopted or used as references, there remains the matter of adaptation to local community needs and resources. It is essential that guidelines and instructions be provided to keep the machinery of placements, special services, and transportation operating smoothly. Each community's unique features are considered in field trips, employment opportunities, and recreation facilities.

Although a curriculum guide is useful as a reference, most of the teachers' planning time will be absorbed by the important task of selecting and preparing materials for daily programs. Until recently, appropriate materials for retarded pupils were in scarce supply, and teachers worked long hours in hand preparation of individual items created for one or a few children.

The Special Education Instructional Materials Centers (IMC's) Network, established by the Bureau of Education for the Handicapped, now provides opportunities for teachers to examine a wide range of materials gathered especially for use with exceptional children. The consultants in special education should be fully aware of the locations and functions of these centers and become involved in contributing to their services by bringing in newly designed materials. He will also be assisting in evaluation of these items by teachers in their classrooms. A report on the present status of the IMC's and plans for the future are discussed by Olshin (1968).

Relationship to General Education

As indicated earlier, the responsibility of the consultant merges with the responsibility of other administrators, especially with individual principals who are concerned about all pupils but who have had little experience with the very exceptional ones. Inservice education for principals can be provided through arrangements with central office administrators and other consultants. Principals should be invited to attend special education meetings, conferences, and workshops, as well as any special conferences in which planning for an individual pupil is of mutual concern.

A relatively large number of pupils considered retarded remain in regular classrooms not for lack of other accommodation but because professional judgment has deemed this the best placement. The question regarding which pupils should remain and which ones should be transferred to a segregated class gives rise to differences of opinion and currently lacks well documented research findings on which to base decisions. The consultant in mental retardation faces the necessity for upholding judgments made by a team, and must interpret these judgments to professional administrators who ask searching questions about comparative costs and benefits of special classes.

The assignment of pupils in and out of special classes must be the continuously shared responsibility of both general and special educators—but this is not universally accepted in practice. The consultant in mental retardation sets the best example by maintaining concern for all pupils, and the concept of providing the best educational environment for the group as well as the individual is never out of his view.

In work with general educators, the consultant will present and interpret many program patterns for retarded pupils other than segregated class placement. Current trends in education are giving more attention to: (a) the nongraded classroom, (b) the use of individualized, small step programed materials, (c) flexible environments which allow for small group instruction, and (d) audiovisual aids to provide learning experiences for pupils with low reading ability. Other instructional patterns now in practice are: (a) provision of a resource teacher available to several classes to assist with slow learners; (b) parttime special classes, retaining maximal integration of retarded and normal children; and (c) special tutoring during or after regular school hours.

In the interpretation of programs for trainable retarded children, their placement in a segregated class is seldom questioned. Other considerations about school programing for the trainable retarded will be discussed in a separate section.

Relationship to Other Consultants

Other consultants include (a) those special educators concerned with various categories of handicapping conditons, such as impairments in vision, hearing, speech, body function, and general health (both physical and mental); and (b) specialists in subject and skill areas such as language arts, science, mathematics, physical education, music, and art.

Special Education Consultants. Increasing numbers of children with multiple handicaps which include mental retardation make for necessary sharing of responsibilities with the specialists in other areas. The central question is: Which program can serve this child best? This may have to be answered on the basis of what is currently available, not what is ideal. Teachers with certification in dual or multiple areas are rare. However, when a child has a loss in vision or hearing, retardation may be the additional factor which hinders his progress in programs structured for average children with sensory handicaps. On the other hand, children once diagnosed as retarded have been found to have other problems, such as a hearing loss, which can be very upsetting. Emotional disturbance often masks other problems and sets up precipitous planning in the wrong direction.

Continuous evaluation, flexibility of programing, and extensive study of the complicated handicapped child must be the cooperative concern of all the special consultants. The consultant in retardation has an additional barrier to contend with: the condition of mental retardation is less acceptable to society than blindness, deafness, and many physically handicapping conditions. Parents resist the idea of mental deficiency, and the transfer of a child from a facility for crippled children to a program for mentally retarded can be very difficult, even when this would be clearly in the child's best interests as seen by the education staff, the psychologist, and other personnel. Likewise, a child with sensory or neurological impairment and some retardation may be served best in a class where the teacher provides a good program for a retarded intellectual development.

With young children, especially, the use of a diagnostic center in which children with multiple handicaps can be studied for a period of time is very helpful as part of the program for preplacement study. In such a center, environmental planning allows for a variety of handicapping conditions—including physical handicaps—and adequate provision for supervision and observation by consultants and ancillary personnel.

When placements are made by a team, the consultant in mental retardation will probably be knowledgeable about a larger group of programs which offer special services. Programs for trainable mentally handicapped children provide great flexibility and a greater degree of personal supervision, and thus can contain children whose multiple problems require extensive attention. It is probably also true that teachers of the retarded have become the most experienced group in accommodating deviant children. When programs for emotionally disturbed children were first developed, teachers were often drawn from among those who had had experience with the retarded.

Other Consultants. In the school system, the consultant in mental retardation should expect some degree of assistance from consultants in all areas. For example, the science consultant can offer help in providing many concrete aids which are intended for primary level classes but which, in the case of the retarded, need to be provided at older ages because the children are not ready to deal with abstract concepts. The help of physical education, music, and art consultants can be extremely useful in the program, and here the retardation specialist can interpret the characteristics of the retarded which have implications for choice of approaches and selection of materials.

Other consultants include specialists in medicine, psychology, and social service. The consultant works closely with the school psychologists who need to know what programs are in operation or are being developed, so that recommendations are not made in isolation from reality. A case can be made for mutual guidance work—the school psychologist and the mental retardation consultant can advise and support each other in effecting changes in service patterns in a school system.

Medical specialists include school and community physicians, neurologists, orthopedists, mental health practitioners, and others. Team conferences should include medical personnel, especially when continued treatment is seen as adjunctive to educational planning. For example, many retarded children can function in a school setting, provided they have a supervised program of drug therapy.

School social workers provide help in the school and home communication about exceptional children. A responsibility of the consultant is to make sure that social workers understand the program plans and goals for unusual children so that realistic communication can be made to parents. In many cases a teacher provides the basic communication to parents because school social workers are not available or have too many other demands on their time.

Classes for the Trainable Retarded

Special demands are made on the resource consultant with respect to classes for trainable children. These classes are relatively new, still controversial, and often excluded from regular school buildings on the grounds that there is no room or they are inappropriate. Sometimes separate school building facilities are made available, and increasingly, special facilities are now planned and built.

The specialist is expected to make many decisions because few other professional persons feel competent in regard to: (a) where the program should be housed, (b) what the criteria are for admittance and exclusion, (c) what supplies and equipment are needed, (d) what the curriculum should include, (e) how the school involves the parents in the program, and (f) how the school program relates to community programs for this semi-dependent group.

The guidelines which follow are suggested for the person with supervisory responsiblity for programs for trainable retarded:

1. Careful preplanning is essential. Community social agencies, parent groups, school personnel, and other consultants (psychologists, medical practitioners, and social workers) have responsibilities.
2. Consideration must be given to establishing a thorough screening process. Admission of the child should be made on the basis of expecting him to benefit from the program because it is suitable and he is ready for it. Not every child who is adjudged trainable by various assessment techniques can profit from the program.
3. Some plan for continuous evaluation must be established and practiced. Parents must be kept aware of progress towards goals of the program, or potential gains will be lost. Planning the next step—when the school cannot provide the optimal environment for the child—involves other social agencies.
4. Community agencies should be encouraged to develop resources for day care and supervision, recreational opportunities, and sheltered workshop employment for older trainable youth. Extension of the work study program in sheltered settings, a concept successfully demonstrated with the educable retarded, should be encouraged for the trainable retarded by the public schools in collaboration with vocational rehabilitation services.
5. Borderlines of noneligiblity for admittance or a placement change to classes for the educable retarded are hazy. Some children who "test" educable function better, at least for a period of time, in classes for the trainable. Others may need a trial period before a judgment is made. Such ambivalence is discomforting to parents and professionals alike, but must re-

main for the present as a necessary concomitant of the effort to serve this highly individualized group of children.

6. Teachers of the trainable retarded are seen as needing somewhat different skills and preparation. Certification standards are under scrutiny, and only recently have specific education courses been geared to programs for the trainable. Presently many summer programs and short term institutes are offered and are open to persons who work with the trainable retarded. Teachers of these classes may need an unusual amount of reassurance because objective measures of teacher effectiveness and pupil achievement are not well established.

Parent groups can be effective as agents to develop community interest and support for school programs for trainable children, especially when reciprocal arrangements are made, and responsibility for the children can be shared by the school, community organizations, and parent groups. A child may attend a day care center supported by a social agency from the time he is three or four years of age or until he appears ready for the program offered by the school. School psychologists and special education personnel may visit the day care center and assess the children thought to be ready for a more structured program. If for some reason, after a trial in school, the child cannot stay because he has additional problems with which the school cannot cope (such as a serious diabetic or a seizure prone condition), he may return to the day care center. The public school system may provide a teacher to work in the day care center with those children excluded from school classes for health reasons.

Somewhat different planning for inservice education is indicated for teachers of trainable retarded. It is helpful to arrange visits to other programs and, if good models exist, to classes in state residential institutions. Information on psychological assessment—its value and its limitations—is needed by the teacher for discussions with co-workers and parents. More knowledge is desirable concerning medical diagnoses and the possible social problems of families when a child with severe retardation is born. Techniques in behavior modification and language development will have special interest to teachers of the trainable retarded.

Other Agency Relationships

State and Federal Agencies. Knowledge of current federal and state plans, legislation, and the availability of assistance through grants is part of the retardation specialist's stock. He must know how to help develop applications for grants, and should be able to provide reality oriented information vital to any plan which includes specifications for personnel, methods of operation, goals, and purposes involving mentally retarded youth.

The consultant will be familiar with the organization of the Bureau of Education for the Handicapped in the US Office of Education, which includes three divisions: (a) research, (b) educational services, and (c) training programs. Federal legislation for education of the handicapped from 1957 to 1967 is outlined in detail by Martin, and assistance to states under the Elementary and Secondary Education Act (Title VI-A) is delineated by Irvin in the March 1968 issue of *Exceptional Children.* This special issue is devoted to information and description of federal level planning and operations in the interest of all handicapped children.

Individual state plans vary according to population needs and level of development of special education services. Resource consultants must be conversant with their own state laws, policies, and plans, and may be called upon to assist with implementation of local programs in line with state standards and legal requirements.

Higher Education. If local area colleges and universities have programs of teacher preparation in special education, the consultant provides an important liaison between the school system and the college. He will plan with the personnel in both systems for a sound program of placing and supervising students in practicums, student teaching, or internships. The college educators will be invited and encouraged to become acquainted with the local programs through visits to classrooms and participation in planning sessions, and the consultant may be invited to talk to the student group at the college.

Employment and Rehabilitation. Many programs for the adolescent retarded have been developed with cooperative funding and staffing by two or more agencies such as the school, the health and welfare departments, and vocational rehabilitation. A description of one such program presented by Jacoby (1967) points out benefits to the students and community, and discusses some of the problems which arise in the situation where two formerly separate agencies must redefine roles and responsibilities.

> Each seemed to be encroaching on the boundaries of the other . . . . An entirely new role for the teacher and counselor has emerged. The transition between school and job for the child is becoming a reality, aided by both teacher and counselor, rather than rehabilitation taking over when the school leaves off [p. 261].

Development of programs for training retarded youth for productive employment has been facilitated by federal government funding through the US Department of Health, Education, and Welfare, the Office of Economic Opportunity, and the Departments of Labor and Commerce. A compilation of the sources for funding has been prepared by the US Department of Health, Education, and Welfare (1968) for use by administrators.

Community Agencies. The call from the community organizations may be a cry for basic information, expertise, and professional counsel. As part of his contribution, the consultant might be asked to: speak to parent groups about the goals of the school program; conduct inservice sessions for nurses, teacher aides, volunteers, bus drivers, and employment counselors; interpret mental retardation to civic and religious groups; or work with staff members at mental health clinics and rehabilitation agencies to enhance understanding of their services by the community.

If the specialist in mental retardation believes one can fight city hall, some useful service for community welfare may occur. The local leaders—and state leaders as well—will be aided by the consultant who can, through his intimate knowledge of local conditions and needs, make recommendations for the reform of laws, regulations, and policies. He can point out certain gaps in services; there are always some children who "fall through the cracks" because they are technically not eligible for any existing program. Service may be denied to a child because he is too old for the program, or lives too far away, or fails to meet some of the criteria. The service umbrella may need to be widened or have more ribs added.

The consultant may assist substantially in state planning through surveys of local needs and by recommending changes in current procedures for recruitment, employment, and certification of teachers and nonprofessional workers in the various school and community programs. It may be necessary for the consultant to offer his help to those persons in leadership positions who have controls over planning and budgets.

The Future

In the forward look, any speculation about the future role of the specialist in mental retardation must arise from observation of current trends in both general and special education.

Education in our society is confronted with challenge and demand to improve, as rapidly as possible, the school programs for large segments of the population, such as inner cities and other poverty areas. Some of the modifications, especially the increase in specialized services within the school setting, will be of benefit to handicapped children who can thereby receive early medical care, social attention, and environmental modifications designed to expand opportunities for learning.

Special educators must keep alert to the range of possibilities for keeping open to retarded children the advantages of the increasing number of innovative practices in general education—the nongraded classroom, the school park, use of paraprofessionals, individualized instruction, team teaching, and flexible scheduling. Many programs funded by federal and state laws are bringing benefits to *all* children and must be counted in when financial support is sought for improving education for handicapped children.

Technological advances in the use of machine aids, including computers, will alter both the school environment and the role of the human teacher. Since new methods and devices must be tested and evaluated before they can be widely accepted, the special educators will need to study the potential uses of the many new aids for educating handicapped children. The human teacher is a key person on the judgment team, but the guidance of the specialist in learning psychology and research methodology will be needed.

In the trend towards granting educational programs for ever younger children, the specialist in behavioral sciences will be called upon for his knowledge of early child development. Diversified nursery school programs will be structured for unusual children. Intervention will be tried in many forms in efforts to offset effects of earlier deprivation. The specialist will be guiding the training of aides and volunteers in settings other than the public school, e.g., community buildings and homes.

Through the work of the Special Education Instructional Materials Centers, better controlled testing and documented results of the evaluation of materials and methods will be increasingly accomplished by specialists and teachers working together. Teachers will be given encouragement and assistance in creating new materials which can be evaluated, tested, and possibly produced for a wider market.

Current discussion among special educators may be leading to an overhaul of the practices by which children are classified or labeled in order to receive special education. The practice of using medical and psychological terms for diagnoses was established as a basis for legal authorization of funds. As pointed out by Lord (1967) ". . . we now see the educational limitations of the group labels we have inherited [p. 51]." If grouping of special children according to educational needs rather than diagnostic labels comes to pass, the label of the consultant specialist may also change. There will be placement specialists (a term already in use) or learning specialists. Children with multiple disabilities will not have to be classified as hearing impaired *or* crippled *or* mentally retarded. The placement specialist will have responsibility for knowing a broad range of possible combinations of services and placements. He will be called upon to assist teachers in planning instruction tailored to meet the needs of children who have varying combinations of handicaps and deficits in learning ability.

Perhaps one outstanding contribution which can be made by the consultant in mental retardation in the future will be his influence upon public opinion and attitudes toward mentally retarded persons. When knowledge and understanding replace ignorance and folklore, the prospects for the future brighten. The cost of the investment in educating and training will be granted more readily, employers will accept such modifications as are needed for employees with limited intellectual abilities, and community agencies will adapt their services to include retarded citizens.

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6 / The State Consultant in a Speech Correction Program

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From state to state slight differences may be found in the roles of the persons who are assigned the responsibility for the overall direction of the speech correction programs. These differences are indicated by the various titles used to designate the position. Director, consultant, or supervisor are the titles most commonly employed; occasionally assistant superintendent, program specialist, or director of special education are used. Director of Special Education usually means service in more than one area of special education. In the main, however, the responsibilities of the persons holding any one of these titles are quite similar. The difference is usually in depth rather than in scope.

Twenty to twenty-five years ago, when speech correction in the schools began, teachers and administrators knew little about what the service should be or how the program could be initiated. This situation, coupled with the fact that states offered financial aid to school districts providing speech correction, made leadership from the state level desirable. On one hand, the districts asked for professional help in planning the new programs, and on the other hand, the state legislators were reluctant to appropriate funds unless some professionally responsible type of guidance governed the expenditure of the money. State departments of public instruction consequently began to employ persons who were knowledgeable in speech correction work and gave these persons the responsibility for developing statewide programs. Today 20 states employ one or more persons as directors of speech correction. In several other states persons serve both the area of speech correction and other types of responsibility.

Basic Responsibilities

What constitutes the role of a state consultant in speech correction? In all likelihood, the law establishing speech correction as a state reimbursed service will have been passed before a consultant is employed. If this is not the case, then the consultant will have responsibility for giving guidance to the committee responsible for writing the law. This committee should include representatives from the office of public instruction, the legislature, and the universities, as well as school administrators and teachers. A consultant has a continuing responsibility for keeping alert to the effectiveness of the law and, when necessary, being prepared to recommend revisions.

Reports, Records, and Guidelines. The consultant is expected to establish procedures for carrying out the intent of the law. This includes the following responsibilities:

First, providing designs for the routine reports which a local school district must make. These are announcements of programs, names, and qualifications of personnel employed, and applications for state financial reimbursement. Certain minimum standards covering the types of physical facilities and equipment to be used should be established. Rules governing the selection of cases, the minimum and maximum numbers to be served, and the frequency of therapy sessions are essential. These regulations, of course, would take into consideration the severity of the speech problems, the facilities available, and the professional competency of the therapists. Suggestions for survey procedures and utilization of resources will be helpful to beginning speech therapists.

Certification of Therapists. Second, although the establishment of qualifications for certification of speech therapists may be delegated to the speech consultant or may be part of the general responsibilities of the teachers' certification board, these minimum standards should in either situation be the result of studies made by a committee on which there are representatives from the office of public instruction, universities, active school speech therapists, and school administrators. Guidance may be secured from the American Speech and Hearing Association, but the establishment of qualifications for therapists is a responsibility assigned by the state to duly elected or appointed persons.

Evaluating Transcripts of Credits. While in some states a consultant must review the transcript of credits for every incoming therapist, there is a growing trend to have the colleges and universities within a state certify that graduates from the speech correction curriculums meet the standards established by the state. This is the approved program concept and represents a desirable trend in special education. Most states, however, find it wise to determine that all persons who received out of state training can meet the established standards. Universities and colleges throughout the country offer very different types of programs and some make no effort to prepare therapists for work in schools even though the majority of positions are found in schools.

There is a movement in the American Speech and Hearing Association to evaluate, upon invitation, the programs offered by universities. When this service becomes widespread, it may not be necessary to review the credits of graduates from approved programs. At the present time, however, any reciprocal arrangement between states seems premature so far as speech correction is concerned.

Answering Inquiries. Important and time consuming responsibilities of the state consultant include receiving visitors and answering letters and telephone calls. In a program as new as speech therapy, many questions are asked. Standardized memoranda or letters can be prepared to answer such common questions as "What are the first steps in establishing a program?" or "I have a child with a speech defect and there is no therapist in our district; what can I do?"

Consultation with School Therapists. The amount and type of direct consultation or supervision that a state consultant can provide for individual therapists depends upon several factors. Foremost among these are the number of therapists and the size of the state. In a beginning program with less than 50 therapists, a consultant may know and work with each therapist individually. As a program grows, and particularly in states where hundreds of miles must be traveled to reach a program, this close relationship soon becomes impossible. Then too, the consultant's own conception of his responsibilities makes some difference. There are those who believe that the role of the state consultant is primarily an administrative one and, further, that he acts as a connecting link between the local therapists and the speech world as represented by the state and federal governments, the various national and state organizations, and the universities. There are others who believe that the consultant should be closely involved in the activities of local programs. With the present size of state staffs (only three state staffs have as many as two persons) and the rapidly growing number of therapists, it is clearly impossible to give close personal attention to each program.

The need, however, for some type of consultative service is apparent. A large number of the therapists are just beginning their careers and consultants are present in few localities. It appears wise, therefore, for state departments to begin thinking in terms of area consultants who will serve several districts. In the event that this does occur and that persons with experience and advanced training do become available for consultation to local therapists, each state consultant will still have the responsibility for visiting at least a portion of the programs every year. Once personal contact is abandoned, leadership becomes theoretical rather than functional. On the spot observation is the only way a consultant can truly know what is happening. It will be through the knowledge gained in these visits that he will develop policies which will improve services.

A consultant has other opportunities for communication with the local therapists. He is frequently invited to speak at local, area, and state meetings. Often persons from other professions attend the meetings, making possible an interchange of ideas which may be mutually profitable. The area which may include anywhere from 10 to 35 therapists provides a particularly effective means by which the consultant can offer professional leadership. State and local plans may be discussed, new ideas explored, clinical procedures demonstrated, and materials exhibited. The lone therapist has an opportunity to talk shop, the experienced person may give assistance to the novice, and the consultant whose schedule does not permit visits to each school district may meet and come to know the staff personnel. In order to get released time for the meetings, the consultant may have to interpret to some administrators the educational value of bringing therapists together for a day or a half day. The planning should be done primarily by the local therapists with the consultant giving direction and guidance when needed—for growth comes through participation.

Professional Writing. The preparation of written materials for distribution to concerned persons is another responsibility of the consultant. These materials may range from a printed manual which delineates the basic plan for a state reimbursed speech program to a mimeographed notice concerning some current event.

Such communications may include periodic newsletters to all therapists, lists of new books and materials, reprints of significant articles or speeches, statistical reports concerning trends in the state program, accounts of research projects conducted in the state, and evaluation letters following consultative visits as a means of providing constructive assistance. A state consultant may find that writing is his most utilitarian means of communication.

Recruitment of Therapists. State consultants are constantly on the alert to interest new talent into the profession. There are several ways young people may become interested in speech correction. The state consultant may seek opportunities to talk to student groups at both the high school and the college levels. Many young people are well along in their college careers before they make decisions concerning vocations, but others make decisions before leaving high school. Therefore, the state educational agency should give wide circulation to brochures which depict speech work in the schools. Other organizations, notably The Council for Exceptional Children, sponsor workshops which provide opportunities to observe special education in action. The state consultant can sponsor and support these endeavors. University departments often have visiting days or weeks during which high school students may become acquainted with speech work. Again, the consultant can provide publicity and assistance to these projects. Newspaper articles, radio talks, and television appearances are other means for reaching talented youth. Movies, videotapes, and filmstrips which show the work of a speech therapist should be made available through the state educational office.

The therapist who has retired temporarily from the profession may be kept interested by maintaining his name on the mailing list for all newsletters and notices. He should be encouraged to retain his membership in national and state organizations and to attend meetings. The consultant may furnish area groups with the names of all local therapists not currently employed in order that they may be invited to join and thereby keep abreast with trends.

Contacts with Others in Speech Profession. In addition to work with the school speech therapists, the consultant has contacts with several other speech related groups. Through participation in the activities of the American Speech and Hearing Association and the Division for Children with Communication Disorders of CEC, he may learn of the progress being made in all phases of the profession and may help therapists who operate in different settings understand the problems and the opportunities found in school based speech correction. His membership in the Council of Speech and Hearing Directors in state departments of education provides an opportunity to exchange experiences and ideas with others holding similar positions. Other agencies concerned with the welfare of children are recognizing the importance of good speech. Speech experts are being added to many staffs. A consultant will want to know and work with people in health groups, in organizations concerned with mental retardation and psychological problems, and in welfare services.

A state consultant has a responsibility for maintaining a close working relationship with university speech departments—a relationship of mutual service. The consultant can provide assistance in curriculum planning by bringing the viewpoint of the schools to the university faculties, as well as by interpreting state laws and regulations. The universities in turn have much to contribute in developing state plans and procedures, since the advice and suggestions given by the experts in the many facets of speech correction are most necessary to the growth of a state program. These are points at which a state consultant and a university staff may very profitably work together. Research, in order to be meaningful to school therapists, must be done in the schools. The state consultant is in a strategic position to direct a merger between a professor in search of a project and a therapist with a question.

The most important point of contact with the universities, however, is the student teaching program where strong speech therapists are developed and an incoming supply of strong therapists is a major concern of a state consultant. The consultant also has the responsibility for ascertaining that the children are receiving effective therapy from student teachers. Further concepts concerning the student teaching program will be discussed later in this chapter.

Relationship with Other Professions

Outside the State Office. The consultant must know the personnel in each of the state organizations and services which in some manner contribute to the rehabilitation of the speech defective child. Included will be medical, dental, psychological, rehabilitative, educational, and social welfare agencies. A state consultant may have memberships in the organizations which represent these groups. For example, The Council for Exceptional Children, embracing as it does all workers with handicapped children, provides an opportunity for exchange of ideas between the people primarily concerned with speech and other persons who have basically similar but specifically different interests. The National Association of State Directors of Special Education is another means through which a consultant in speech correction may communicate with others who work at a state level directing programs for handicapped children.

When medical, dental, or psychological groups have meetings which are devoted to problems of speech, the consultant may want to attend and participate in discussions. He will want to be familiar with the programs provided by child and family welfare agencies and, when needed, make plans for integrating social service with speech therapy.

Educators in many areas can make helpful contributions to the plans for the rehabilitation of speech problems. A consultant not only should be acquainted with the university leaders in allied fields such as psychology, guidance, and reading, but also should know as many as possible of the public school staffs. An effective speech correction program demands a close working relationship between the classroom teachers and the therapist. Through an interchange of knowledge each can better help the child in his efforts to achieve acceptable speech, yet this interdependence may result in some misunderstanding concerning the role of each in a school program. Questions which frequently cause confusion are these: What type of help in a general speech improvement work can a therapist give the teacher? What articulation defects may be corrected by speech work within the classroom? Recognizing the shortage of adequately prepared persons in both the classroom teaching and speech correction services, one must carefully define the speech responsibilities of each person and use the time and talents of each in the most efficient manner. On this point a state consultant may render valuable guidance.

With the growing acceptance of the importance of speech in a child's educational development, an increasing number of teachers are taking speech correction courses designed for the classroom teacher. While therapists may give some consultation and assistance in this teacher program, they should not take a major responsibility for the classroom speech improvement work, nor should their speech therapy case loads be reduced in order to give time for classroom work. These are two different programs. One is for all children and is part of the classroom teacher's professional program. The other is a clinical service for children who have other than minor speech defects and is the responsibility of the therapist. Neither of these professional persons has the time or the preparation needed to do the other's work.

Tests designed to separate minor speech developmental problems from genuine speech defects are still in the experimental stages and, until these tools are made practical for school use, the judgment of the speech therapist will determine case load. How can a speech therapist serve the greatest possible number of children? Two innovations will prove helpful in extending speech therapy. One is the employment of semiprofessional persons to take the responsibility for such tasks as preparing materials, keeping records, and answering inquiries. The second aid is the greatly increased use of machines, such as auditory training devices, speech recorders and reproducers, and films. Rooms can be designed with semisoundproof booths in which programed learning can be offered to several youngsters during the time a therapist works with one or two individuals. While the size of case loads in the future may not be much larger than it is now, the speed with which defects are treated will be increased.

A major responsibility of a state consultant in the next decade will be the interpretation of this new concept regarding speech therapy programs. He will give assistance in defining the role of the semiprofessional personnel, as well as in securing and using the new materials. These aids, together with more scientific case selection, will increase the efficiency of speech therapy programs. Concurrent with these changes, greater numbers of classroom teachers interested in speech improvement work can be expected. This concern will absorb some of the current therapy load as well as give increased emphasis to good speech for all children—and that, of course, is the true reason for stressing both speech improvement and speech therapy.

Some of the interested groups with whom the consultant may work will be local, some will be statewide in their scope, and an increasing number will operate from the national level. A few will be private agencies, but the majority will be tax supported organizations. In this era of greatly increased federal interest in and support for handicapped children, it is extremely important that a consultant be involved in the national movement. Time must be allocated for the contacts necessary to obtain maximum benefits from these many resources. In interprofessional planning for policies or projects, the consultant represents the point of view of the speech therapists and offers contributions unique to speech specialists.

Within the State Office. Channels of communication between the state consultant and his professional coworkers must be kept open. The consultant has the responsibility for providing information which keeps the administrators informed of the progress of the program, its problems, its needs, and its successes. These reports are largely statistical summaries which show the locations and growth of the programs, the number of children served, and the types of speech defects found. Administrators are also interested in the educational and experience levels of the therapists as well as the salaries paid at varying levels. The specific activities of the consultant should be summarized periodically. This report not only keeps the office informed of the consultant's work, but it also presents a summary picture which helps the consultant himself to evaluate his own use of time and opportunities.

Office Procedures. Years ago in the opening sentence of his book on classroom management, William Bagley (1922) said, "System and organization are the universal solvents of the problem of waste [p. 13]." System and organization in statewide programs are indeed of prime importance. While the following procedures are basic to all good office management, each consultant devises additional procedures which serve his particular needs.

Upon coming into an office, a consultant is informed concerning established policies and rules. He learns the organizational structure, the methods for securing supplies, the time schedules, and all other general office practices.

Routine procedures regarding mail are developed. The secretary attaches previous correspondence to incoming letters or notes "no previous correspondence." Important outgoing letters are reviewed and signed by the consultant and in some cases by the director of the department. The secretary may be authorized to sign less important ones.

The consultant prepares sample form letters which answer common inquiries, such as "What are the required qualifications for speech therapists in your state?" or "Where are speech therapists trained?" The secretary can be expected to handle these letters without referring them to the consultant. Letters asking for hotel reservations may specify "hold for late arrival," "minimum rates," and "please confirm reservation."

The consultant devises checklists for recording such information as the evaluation of credits, pertinent facts obtained on a visitation, and summations of telephone conversations. A confirming letter follows a telephone talk.

An efficient filing system is the best single timesaver a consultant can have. A written plan for filing and cross filing is developed and the consultant supervises its operation. The secretary establishes and maintains a current file of frequently used names, addresses, and telephone numbers to be kept readily accessible.

Conclusion

The accepted role of a consultant in a state department may be summarized under the following points. First, there are responsibilities which by law have been assigned to the office of the superintendent of public instruction and which have been delegated by him to the consultant or supervisor of speech correction. These primary duties are the development of standards for local school programs, disbursement of state funds to approved programs, and determination of the certification requirements of speech therapists.

Second, the implementation of these basic responsibilities involves evaluating college credits, answering inquiries, and maintaining professional contacts outside the field of speech. The consultant's major obligations, however, are to provide leadership to speech personnel both within and outside the state program. This latter activity includes a close working relationship with both state and national professional groups, consultative or supervisory services to the local public school therapists, and the recruitment of new personnel.

Last, but highly important, is the organization of office procedures. The effectiveness of a state consultant in performing his professional duties will depend in a large measure upon his acceptance of his role as an office manager.

This is the current picture of a state consultant's job. It may reasonably be anticipated, however, that the concepts of the role and function of a state office of education will change. Concurrent with a trend toward placing less responsibility on state departments for specifying required college courses and reviewing credits, there is a trend toward giving the universities the responsibility for certifying that their required curricula have prepared competent graduates to do certain kinds of work.

It may well be that in the fairly near future, state departments will consider one of their prime functions to be the development of close working relationships with the universities and the public schools for the student teaching experience. To carry out this function, the states may have an active role in determining what happens when the university student works in the school. Recognizing that the evaluation of college course credits does little to indicate a candidate's ability to function in the school situation, state departments are becoming more interested in the quality of work done in the supervised professional experience.

There are many reasons why these may be hopeful trends. First, in the speech program the state has the responsibility for knowing that the pupils are receiving adequate therapy under the tutelage of the cadet. Second, the state is, of course, desirous of having progressively better prepared speech therapists. University staffs will in all likelihood welcome this increased interest on the part of the state in the student teaching work. Often these staffs have found it difficult to convince their superiors that there must be an allocation of time and money for this all important off campus supervision. If a graduate's teacher certification depends upon the state's approval of the quality of the work done in the supervised experience, the importance of the work will be recognized by even the most academically minded dean. The university, of course, would furnish the major supervision, but the state would send visitors to evaluate the work of the student and make a recommendation for or against state certification. The local schools would appreciate this increased interest on the part of the state in the student teaching activities. Frequently, the local school superintendent has no professional staff member who can assist in establishing the student teaching program and in evaluating its results. Guidance from state staff persons who have advanced training and experience would be helpful.

It may be expected that a service developed somewhat along the lines suggested here will afford the state consultant greater opportunities for dynamic and functional leadership. The result would be a more effective speech correction service for school children and this, of course, is the fundamental reason for having a state consultant for speech correction.

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7 / The Consultant in Programs for the Physically Handicapped

JUNE BIGGE

It is the purpose of this chapter to provide suggested administrative guidelines to implement or supplement educational programs for children who are crippled or who have other special health problems. Although the general title *resource consultant* is used throughout, this chapter provides guidelines to those who function as directors of special education, as supervisors or coordinators of special education, as elementary supervisors, as directors of pupil personnel services, as assistant superintendents assuming the parttime duties of directors of special education, or as other special education leaders. A resource consultant may be responsible for consultation service only; however, he may also be called upon to supervise and administer programs. Accordingly, it is the purpose of this author to delineate the wider scope of *functions,* rather than the narrower *roles* of personnel.

It is evident that some children may have handicaps with accompanying physical, learning, or other behavioral complications which are severe enough to warrant their enrollment in special schools or classes which are best equipped to meet their unique educational and physical needs.

While providing guidelines applicable to these programs, this chapter will focus upon administrative considerations which facilitate cooperative programing of such a nature that special education students participate partially or fully in a regular elementary school program.

Educational objectives are similar for both handicapped and nonhandicapped children. Common objectives include the provision of opportunities for students to achieve the fullest measure of self realization possible enabling them to become contributing members of society to the extent of the capabilities of each. Research indicates that partial or full admission of children who are crippled or who have health impairments into regular classes is ideal for the development of those who are socially, emotionally, and intellectually able to participate in some aspects of the regular elementary school program and whose physical condition does not prohibit such participation. The increasing number of children who are crippled and who have other health problems within the regular school requires additional administrative consideration at the central, district, and local school levels.

Whether educational programing for these children can be most effectively accomplished by cooperative programing between special education and regular school personnel, or in a special setting, the goals remain the same—to facilitate more nearly normal and optimal functioning of individual children.

Administrative Provisions

A resource consultant suggests and assists in the establishment of administrative structures for educating handicapped children. He should also provide leadership in the effective operation of these programs. Various types of administrative provisions are as follows:

Home Teacher. Students are educated at home by teachers provided by the district if (a) their physical impairments or health problems are severe enough to confine them to their homes for their educational programs, or (b) there is no special school program available to them.

Hospital Teacher. Students are taught at bedside or in small groups. Teachers usually are employed by the public school system.

Teleteacher. Homebound students communicate with a centrally located teacher and other homebound students by means of a multiple telephone connection.

Segregated Classes. Students whose physical impairments, health problems, learning disabilities, or multiple handicapping conditions are severe enough that they cannot adequately function in a regular school setting are enrolled in special schools or special classes in which the entire program is isolated from regular school programs. Dunn (1963) writes: "Schools such as these have the advantage of being able to concentrate specialized personnel and equipment in one place, thus making medical, therapy, and other services more readily available [p. 488]." Whereas continued placement in a segregated program is most beneficial for some students, for others this placement will be only temporary. These include students needing concentrated therapy, those recuperating from surgery, or those benefiting from special teaching techniques.

Partially Segregated Classes. Pupils attend classes in a segregated school but there is no specific plan to provide opportunities for children to participate in regular classroom activities. When feasible, students have opportunity to interact with youngsters in school assemblies, on the playground, and in the lunch room.

Cooperative Programs. Students are enrolled in the special education program and spend a portion of their day in that program and a portion in regular school programs. Dunn (1963) states:

> A special class or unit of several classrooms in a regular school building is increasingly favored over a separate school for children with crippling or chronic health conditions who are unable to attend regular school. With this type of arrangement, the handicapped pupils can participate in many learning activities with their non-handicapped peers and still have the advantages of specialized equipment [p. 489].

Resource Room. Students are registered in the regular classroom and do most of their work with the regular group. They only go to the resource room and the resource teacher for materials and special training. During a specific activity, the special education teacher might assist a child in his regular classroom.

Varied Combinations of the Plans. One or two special education teachers might vary the types of services to the district. For example, the child may be with the special education teacher in the morning and with the home teacher in the afternoon.

For districts unable to provide programs independently, the resource consultant can assume a leadership role in the development of programs and services on an interdistrict cooperative basis.

Pupil Placement

A resource consultant assumes responsibility for coordinating educational referrals, examinations, and placement of pupils. Referrals and criteria for admission to the program for children with orthopedically handicapping conditions or special health problems should comply with the educational code of the particular state. Pertinent factors in determining proper placement for a pupil include such items as type, degree, and number of exceptionalities; age of pupil; scholastic aptitudes, interests, and achievements; behavioral characteristics; alternate educational programs available; special competencies of teachers and other staff; types of related services available to the school system; and distances of the services from the child's home.

Consideration of individual children and district facilities should determine the particular placement of each pupil, whether it be in a regular public school class, in a special class at a public school, in a special public school for the handicapped, or in one of the alternate progams enumerated.

Suggested criteria for enrollment of children in a special school for the crippled and other health impaired are:

1. The presence of a physical disability or other health problem that requires special physical facilities, special equipment, medical therapy programing, or special educational programing for special learning and behavior patterns.
2. Evidence of educability when this is a prerequisite.
3. Absence of physical conditions which require more protection than can be provided while children are being transported on a school bus and while participating in the program of a special school.
4. The recommendation for trial in a special placement made by the admissions committee.

Criteria for enrollment of children in a program of partial or full participation in the regular elementary school progam include:

1. The presence of orthopedically handicapping conditions or special health problems which require some special educational services.
2. Inability of the child to take reasonable advantage of the regular school program without the special services provided by resource teachers.
3. Ability of the school to meet the child's unique needs in educational programing focused on facilitating his total adjustment to his present limitations.
4. The child's social, emotional, and intellectual ability to participate in some aspects of the regular elementary school program.
5. Age range of approximately CA 4 years, 9 months to 14 years.
6. Physical conditions that do not require that the child have more protection than can be provided at a regular elementary school.
7. Placement by recommendation of a licensed physician.
8. Parental permission for placement, with the parents' realization that placement is made on a trial basis.

A physically handicapped child should be programed to participate in a regular school if he is able to succeed academically, socially, and emotionally under normal school conditions. However, enrollment of special students in regular classes is an important step that must be considered carefully by all concerned. To help professional personnel arrive at well considered placement, a worksheet should be completed for each child who is to be enrolled in a cooperative program. Furthermore, enrollment should be preceded by a conference which includes the director of special education, the school principal, the special education teacher, and the regular teacher. All placements should be made for a trial period in order that each child's school adjustment may be observed.

Facilities in the Regular School

A resource consultant should appraise the physical facilities in the regular school classrooms to insure adequate safety and comfort for the handicapped child. Following are some modifications which might be necessary to adapt the regular classroom to meet the needs of the handicapped child:

1. Provision of a short ramp to enable children in wheelchairs or on crutches to enter the building.
2. Addition of a hand bar by a drinking fountain, in a toilet stall, and near a section of blackboard.
3. Removal of some desks to make room for wheelchairs.
4. Provision of footrests and adjustment of seats to turn to the side so that a child with braces can sit more easily.
5. Addition of hinged extensions to desks for children who have poor sitting balance.
6. Elimination of protruding parts over which a child might trip.
7. Provision of equipment such as special adjustable chairs, stand up tables, stabilizers, or cut out tables for children with special problems with sitting or standing.
8. Removal of desk bottoms to accommodate wheelchairs.
9. Expansion of doorways and addition of protective material at the bases of doors and door jambs.
10. Provision for nonskid floors.
11. Accommodation of play areas, toilet facilities, and drinking fountains for children in wheelchairs or on crutches.
12. Access to any upper floors via elevator.

Developing Working Relationships

The resource consultant serves in many capacities and must develop channels of communication to facilitate good working relationships with other special education personnel. He must understand the organizational duties and relationships of personnel.

The special education leader may be vested with an advisory or staff relationship with schools and personnel involved in educating exceptional children. He may also be granted authority over schools and classes of special education. The governing board and the superintendent may direct the special educator to be directly responsible for handicapped children in the community and in cooperating school districts.

The principal of a school containing special education classes is usually under the direction of the superintendent with staff assistance from the director of special education, and he is responsible for all teachers in his school.

The special education teacher serving in a special resource room class which is housed in a regular elementary school is administratively responsible to the principal of that school. The teacher of a special education class housed in a regular elementary school which is, however, operated by the county superintendent of schools' office and not by the local school district, will be directly responsible to the county superintendent or his representative.

A resource consultant must help to clarify the functions of the school principal, teacher, and medical and therapy personnel in relation to special education programs.

The School Principal. The building principal has some general responsibilities in regard to special education programs. He functions in direct daily contact with the special classes and he sets the tone and pattern of living and working for special classes just as he does for the regular classes in his building. He interprets the program to the staff members and to parents of both normal children and handicapped children. The principal conducts professional evaluation of the teachers with recommendation to the superintendent for retention or dismissal of teachers, and he elicits guidance from the special education leader in establishing criteria for evaluation of teachers and programs. He develops a plan for care of handicapped youngsters during emergency procedures, and investigates insurance regulations and coverage for handicapped youngsters. He needs to broaden his own professional background to include special education and encourage the staff to grow professionally by attending college or university classes, special professional meetings, and conferences. He should also encourage teachers of normal children to take at least an introductory course in the education of exceptional children.

The school principal also has some special and particular responsibilities in regard to special education programs. He supports the special teachers and classes by:

1. Conducting teachers' meetings for handling administrative business, inservice training, and intraschool communication.
2. Working with parents.
3. Securing the assistance of special service and special subject personnel.
4. Including the special teacher in activities and schedule of the total school.
5. Accepting the special classes and their programs as a part of the total school operation and arranging for integration of special class pupils in regular classes, when advisable.

In addition to his support of the special education teachers and classes, the principal also investigates and delineates the particulars of the transportation program in conjunction with the director of special education. From the supervisor of transportation, he secures a list of rules and regulations for children while on buses, and, from the proper authorities, he secures confirmation that vehicles meet the state highway patrol regulations (safety straps, etc.).

The principal communicates with the parents regarding transportation and he clarifies adult responsibility for sending and receiving the child. In addition, he obtains signed requests from parents concerning procedures to follow when they are not at home to receive their children, and he develops and promulgates a policy statement to the effect that a child is the responsibility of his parents until he is placed in the vehicle in the morning and from the time he exits from the vehicle in the afternoon. He makes clear to vehicle drivers that they should not accept verbal orders from parents regarding unusual pick-ups and deliveries of a child without clearance from the school. He encourages vehicle drivers to limit amounts of visiting with parents when picking up and delivering children, and he advises them in regard to the supervision of the children's conversation and conduct while en route. Finally, he outlines proper procedure for parents to follow (a) when the vehicle fails to pick up the child, (b) when a child is not ready when his transportation arrives, (c) when a child is going to be absent, and (d) when the child has been absent and is ready to have his transportation resumed.

The Special Education Teacher. In cooperation with the school principal, the resource consultant assists in the developing of clarification and understanding of the functions of the special education teacher. Like the principal, the teacher has certain general responsibilities.

One of his most important responsibilities is to study the children's case histories and cumulative folders for implications for educational programing and to incorporate special teaching approaches and equipment to meet the unique needs of all children, including those with multiply handicapping conditions (i.e., blindness, or deafness).

Upon request of the regular classroom teacher, he supplements regular classroom teachings, by adapting educational materials to the individual needs of the children and encouraging them to become more independent in their academic attempts. He also helps children make up missed work, develop independence and other self help skills which are lacking because of muscular incoordination or weakness (i.e., by teaching the child to push his own wheelchair, get out of the wheelchair alone, take off his coat, etc.).

The special education teacher arranges for construction of special equipment for those who are unable to function effectively with regular equipment. For instance, he might have work tables constructed to fit on wheelchairs or classroom chairs adapted with footboard and straps and thus alleviate any problems of physical discomfort in the classroom.

Of course, he is always available in emergencies, and he assists those who need aid in the bathroom (with the additional help of the teacher's aide or the children's assistant). He also meets the transportation vehicle in the morning, making sure that children arrive in their classes, and he prepares them for their return home on the afternoon vehicle.

The special education teacher also has certain interdisciplinary responsibilities. He should confer with each child's physical, occupational, and speech therapists and incorporate into the classroom any therapeutic suggestions which may help the child function in more normal patterns. To gain a better understanding of the children and their therapy needs, he visits therapy sessions. Additionally, he confers with medical personnel regarding implications of medical reports for the children's welfare in the school setting, attends clinic sessions to gather and share information, and communicates with the other specialists.

He sees that pertinent medical, therapeutic, or psychological reports are shared with appropriate school personnel, and that safeguards of confidentiality are observed. Also, he participates fully in medically oriented conferences, meetings of community health organizations, educational conferences on exceptional children, and school district curricular meetings.

In addition to his other duties, the special education teacher has certain responsibilities toward the child and his family. Serving the children from a resource room or a special classroom in the school complex, he provides necessary information to the regular classroom teachers and principal receiving the handicapped student, and serves as a consultant to classroom teachers.

He uses a team approach in delineating special learning disorders and uses specific teaching approaches to alleviate specific disabilities. Also, he serves as a liaison between the medical, therapy, speech, and psychology disciplines and the regular classroom teacher, and he confers with other staff members concerning individual children and their needs.

Of course, the special education teacher is also responsible for carrying his share of all school duties and responsibilities (i.e., yard duties, bulletin boards, etc.). During group games and active classroom activities, he assists children in wheelchairs or on crutches, and, at the same time, he helps them increase and improve the number of things they can do for themselves. Finally, the special teacher helps other children and adults realize the potential of handicapped persons.

Teacher Aides. The resource consultant may also facilitate the instructional program by advising in the selection of aides, by participating in their inservice training, and by helping to delineate their duties.

Teacher aides should be mature, capable persons, flexible in their ability to relate to teachers, parents, and other personnel. A teacher aide should know and practice the same high ethical standards as the teacher. She should discuss any misunderstanding or problems with the teacher involved.

A college course in the education of exceptional children may prove helpful to the teacher aide by providing a background of information on the types of children with whom she will be working.

In caring for the children, the teacher aide may be responsible for supervising them on arrival to and departure from school, and during passage to and from the auditorium, restrooms, other classrooms, the playground, and the therapy unit. She may attend to the toilet and personal needs of the children, and place them in chairs or at standing tables, and help to train them to become independent while eating. She may help them with grooming and dressing procedures and with other matters of comfort and safety. She can prepare classroom aids, care for and store special equipment, and participate in arts and crafts, vocational, and recreational activities. However, the teacher should not expect her assistant to assume teaching duties. When the teacher is out of the room, the aide should assume a supervisory role.

Another duty of the aide is to augment the enforcement of classroom discipline by reinforcing the maintenance of desirable behavior standards under the direction of the teacher. She provides valuable assistance in the management of emotionally disturbed children and by watching for any behavior, health, or physical deviation which warrants the attention of the teacher.

The aide should not attempt to evaluate children's school progress or interpret curriculum or teaching methods to parents. However, she can assist in establishing and maintaining cordial and friendly relationships between home and school.

The Regular Classroom Teacher. Another role for the resource consultant is to work toward facilitating the acceptance of handicapped children by the regular classroom teacher. The regular teacher has certain functions and responsibilities in his role as teacher of the handicapped, as does the special education teacher.

The regular classroom teacher first must assume the responsibility of including exceptional children in as many aspects of the regular school program as possible, and he encourages exceptional children to participate in activities to the best of their abilities. He employs creativity in adapting experiences and activities so that a handicapped child can feel a part of the group. He must meet the emotional needs of the children by keeping the classroom free from extreme tension. He works with parents and others with whom a child has contact, to help them to understand the child and how best to fill his need for affection without becoming overly solicitous and thereby delay the process of emotional maturation. He realizes that handicapped children need the recognition of their peers (including nonhandicapped children) in their family, school, and community. In addition, the regular classroom teacher assumes responsibility for contacting the special education teacher concerning each special child's educational problems and he assumes responsibility for evaluating and reporting the child's achievements and adjustments.

Medical, Therapy, and Educational Staff Members. The relationships among these members of the program are coordinated by the resource consultant, who is aware that state departments of education and local school districts provide educational aspects of the program while state departments of public health and local health agencies provide medical and therapeutic services. Accordingly, dual administrative roles often must be delineated. Educational resource consultants can help to clarify the following questions which may arise as a result of the dual administration of a program:

1. Under whose direction should the therapists and educators coordinate their efforts in behalf of individual children?
2. Is there a policy regarding the administrative responsibility and role of the state department of health in serving therapeutic needs of crippled children in the various organizational district programs?
3. What are some program responsibilities of the Crippled Children's Services?
4. What financial obligation for therapy would a district need to consider when anticipating programs for handicapped children?
5. Who finances therapy when it is necessary for children to be transported from the education unit to a therapy unit? Who provides transportation?
6. If one district contracts with another for educational programing for crippled children, how might therapy be provided and financed?
7. Who would be responsible for setting up and administrating medical clinics?
8. Who would designate the proper use of medical and educational records?

Usually, state personnel in both health services and education are available for assistance and consultation at no cost to the districts.

The educational consultants might be asked to initiate the contact between the two disciplines on the state level or district level.

Curriculum Responsibilities

Generally speaking, the same curriculum content which has been found to be important and successful for nonhandicapped students is equally important for those handicapped youngsters who meet the criteria for admission into a program which allows them to participate in regular school functions. Some specific curriculum adjustments may be necessary for certain groups. Furthermore, in some cases, it may be necessary to provide a curriculum unique to each individual child.

Some children with cerebral palsy may have, in addition to muscle incoordination, some learning disabilities associated with cerebral dysfunction. These children often need a kind of special consideration and instruction which may best be provided by a special education teacher. Some children with cerebral palsy may also have multiply handicapping conditions of mental retardation, visual complications, and hearing deficiencies. Thus, a concentrated special education program may serve them best.

Summary

A resource consultant provides many services in the educational program for children with orthopedic handicaps and other special health problems. His major areas of responsibility are:

1. To help determine the types of special education programs most feasible for the district and for the children within the particular district.
2. To determine the probable number of handicapped children in the district who could profit by partial or full participation in special educational programing.
3. To assume responsibility for establishing, administering, supervising, and implementing the special education programs.
4. To consider factors such as locations of buildings in districts, spaces for loading and unloading children, and availability of additional space for therapy programs.
5. To establish the program in a setting where staff and parents will accept the handicapped child as an integral part of the school.

6. To consider factors such as enrollment size, transportation, and financial support.
7. To help determine the services that can best be supplied at the local, county, and state levels.
8. To arrange transportation for individual students.
9. To set up a multidisciplinary screening committee concerned with evaluating available information and making recommendations for individual educational programing.
10. To collect and disseminate information concerning children, when appropriate.
11. To counsel students and parents.
12. To cooperate with medical and educational personnel who wish to observe such a program.
13. To consult with state and federal personnel, other school administrators, parents, and community agency representatives.
14. To become familiar with legislation regarding programs for exceptional children.

The problems which arise in providing special educational services for children with physically handicapping conditions and/or health impairments are numerous and complex. School and health services personnel are faced with a multiplicity of concerns in their attempts to provide good education administration, effective pupil placement, and curriculum provisions to meet the needs of both normal and handicapped children. It is a necessity, therefore, to develop efficient working relationships among special education personnel.

It is hoped that these administrative and program guidelines will assist resource consultants, as well as administrators, principals, teachers, and medical, therapy, and educational staff whose work involves providing services, facilities, special equipment, and materials for the education of the physically handicapped and health impaired child.

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8 / The Consultant for Programs for the Gifted

RUTH A. MARTINSON

The consultant for the gifted is a kind of Johnny Come Lately among special consultants. Except in a few school systems, such as San Diego and Cleveland, special consultants have not been assigned to this field until the last decade. Even at the present time, consultants who have this assignment function in different roles and relationships and frequently have different backgrounds of preparation than do other consultants.

The Unique Aspects of the Consultant's Role

The consultant who works with teachers of the gifted undoubtedly comes from a far more diverse background of preparation and experience than is the case in other special programs. In fields other than the gifted, resource personnel generally have completed basic teacher preparation in the area of specialty, and have taken specialized work in supervision in the given field. Thus, the individual who works with teachers of the mentally retarded typically has acquired the basic credential for teaching the mentally retarded and has taken graduate courses to qualify as a consultant to teachers and other school personnel.

The consultant on the gifted, however, usually has not taken a sequence of courses leading to a teaching credential for work with the gifted. Such sequences are virtually nonexistent. It is much more likely that the special consultant on the gifted is an individual who has acquired his special knowledge through independent study, research, workshops, single courses, and through direct work with the gifted. Thus one finds that consultants in this field may come from backgrounds in teaching at the elementary, secondary, or college levels, may hold advanced degrees in a wide range of subjects, and may possess credentials in general supervision, administration, or pupil personnel services. The common element which characterizes them is dedication to the importance of programs for the gifted, rather than any set background of preparation. For example, among the state directors of programs for the gifted, there are individuals functioning as general supervisors and administrators, or having responsibility for an area of handicap, who have widely different backgrounds of preparation and whose previous experience has ranged from classroom teaching to supervision and administration and to school psychology.

Another basic difference between the consultant for the gifted and consultants in other fields such as mental retardation is that the consultant for the gifted often is expected to fulfill other roles in addition to his special assignment. This may be the case even if the number of gifted children in his school system demands the equivalent of a full time assignment. This condition particularly exists in those school systems which are not large enough to support large consultant staffs. The assignment of the program for the gifted, therefore, becomes a responsibility in addition to another general responsibility, or an adjunct to another often unrelated responsibility.

The problem in multiple assignments is that the consultant lacks sufficient time for his duties, and, if he has another major assignment, he acquires the necessary background on the gifted as he works at the task. Part of the problem is directly attributable to the lack of funds for programs for the gifted; another part is the general assumption that the good general supervisor is an expert on good programing for the gifted.

A third major difference between the role of the consultant for the gifted and other specialized consultants lies in the fact that the consultant for the gifted often works with these exceptional children within the regular classroom setting. The children, particularly at the elementary school level, are placed in heterogeneous classes, and any special or individual provisions must occur within the regular class. If the children are dispersed widely throughout the school system, the consultant consequently must work with many teachers to plan suitable educational experiences for individual children, and must conduct many special programs of teacher education with large numbers of teachers and administrators. Since a wide variety of administrative arrangements are employed by various school systems in planning for the gifted, the consultant faces a great challenge in fostering general understanding of the gifted and their needs within the total staff.

A fourth differentiation lies in the academic variability of the population to be served. A safe prediction is that, in any group of twenty gifted children, twenty varieties of highly specialized and widely differing interests will be found, and these interests will change periodically and unpredictably. The consultant who serves the gifted at the elementary and secondary school levels serves an actual academic range from early elementary to graduate school levels in all academic fields. Almost any sphere of human endeavor is within the interest range of the gifted; because of their wide ranging interests and avid consumption of learning, they are more heterogeneous and complex in academic and creative performance than any other group, and thus more difficult to provide with learning materials. The diversity and pace of performance within this population create vast demands upon the time and energy of consultants in their efforts to assist teachers.

The academic excellence of the gifted creates a fifth problem for the consultant in his work with teachers and other school personnel. This is the problem of implementing the real meaning of the term "individual differences" in school practice. All educators profess belief in the term, and insist that concern for individual differences is basic to curriculum planning. In the process of implementation, however, the consultant may encounter resistance when recommending procedures or materials which differ radically from the traditional methods. The problem of interpreting the right of children to deviate upward is very difficult and requires great skill and patience on the part of the consultant.

A sixth challenge to the consultant is the general assumption by many educators that their own theories regarding the gifted (often independent of study or background) are correct. Generally, educators hesitate to profess knowledge about teaching methods or materials with the visually impaired or the orthopedically handicapped unless they have had special preparation. They may, however, offer their views on programs for the gifted, without attention to research knowledge and the views of specialists in the field. Therefore, we find controversy regarding the merits of individual planning as is the case with no other group of children with special learning needs, and there are questions even as to whether the population exists. We also find that teachers with special preparation and skills for working with the gifted are rotated out of classrooms in favor of giving everyone a chance, although such a practice would be condemned for teachers of handicapped children. The consultant for the gifted is subjected to frequent questioning regarding his planning for the gifted, and must possess unusual skill in the interpretation of the program.

Finally, the consultant for the gifted faces a challenge in the hesitancy of many superbly qualified teachers to work with the gifted. This is not due to lack of contact or background alone. Some of it probably is due to the poor self image of the teachers induced by widely reported studies in the past of their low ability in comparison to other population groups. More recent studies have indicated that many gifted individuals are choosing teaching and other socially oriented occupations, and that the profession of teaching attracts many gifted persons. (This writer, in a 1961 study of vocational choices of gifted high school seniors in two large urban high schools, found that 17 percent of the gifted students listed teaching as their first choice.) Nevertheless, the consultant has a problem of working with teachers, even those in the primary grades, who are dubious about their ability to teach the gifted, and he has the problem of assisting them to view themselves and their role properly.

The unique aspects of the task of the consultant to teachers of the gifted which have been cited above indicate that the person who fulfills his obligations successfully must possess not only an excellent general academic background, but also must have thorough knowledge of the research and theoretical bases for program planning for the gifted, as well as skill in working with colleagues and other adults to enhance their understanding and support of the program.

Administrative Relationships

Since the program for the gifted is peculiarly dependent on the support of administrators and staff members, the consultant has more than ordinary interest in developing and maintaining their enthusiasm for the program. Unlike other programs, the permanence of the program for the gifted is not insured by continuing and adequate funds. The program endures or fails as a direct result of internal rather than external support. In school systems which have maintained programs over a period of time, the superintendent and his staff members have been directly involved in planning and in working out program changes, and have been kept aware of program results, either through evaluation or through periodic presentations of pupil achievements. The successful consultant works closely with staff personnel to assure their understanding, and paces any program change so that it is consonant with staff readiness to accept it. This is to say that the consultant does not institute programs, excellent though they may be conceptually, until he is also sure that his colleagues want them. He may postpone action until readiness occurs, since he knows that, without acceptance, the best program is doomed to failure. Persuasion and education, then, become important means toward improving the programs for the gifted, as well as direct planning and organization. In the process of education, he may involve administrators in visits, conferences, observation, and discussion. The expectation is that change will occur as administrators learn that change is needed.

Provision of Meaningful Data. One means for convincing administrators of the need for special programs for the gifted is through presentation of specific data on pupils. When administrators learn that a six year old child has been replicating science experiments described in *Time* magazine; or that a seventh grade boy reads Kafka and is interested in Marx, Nietzsche, and transcendentalism; and that a third child has had poetry published, they begin to ask what the schools can best contribute to their education. The practice of concentrating upon children and their specific needs is much more likely to produce desired results than is the advocacy of administrative change in the abstract. When the individualizing of education for children with specific needs is the focus of concern, administrators themselves will suggest change.

The accumulation of complete data on the child population is basically important to intelligent program planning. Adequate case study data place the primary emphasis in educational planning on the child rather than on a predetermined body of subject matter. Fortunately, much of the information on the gifted child can be acquired through evidence of performance and external report, rather than through the expensive clinical assessment of potential required for the handicapped. Data can be acquired through questionnaires and other means from the child himself, from teachers, parents, and from other adults. Often, dramatic evidence of unusual achievement can be accumulated.

Appropriate Testing Programs. The careful planning for acquisition of data on the gifted child so that his achievements and educational needs are clearly evident is a basic responsibility of the consultant. This responsibility should be cooperatively assumed with administrative and psychological personnel.

The planning of appropriate testing programs rests with the pupil personnel staff, unless the consultant for the gifted has had specialized preparation in this field. Whether the consultant takes direct responsibility for the testing program or works with the psychologists who assume this task, he should advocate the use of individual intelligence tests and achievement measures, both with adequate ceilings. The use of adequate tests is important, since (a) the expectation of the teacher often is affected by her view of a child's potential, and (b) program evaluation must be based on valid measures of achievement.

Appropriate staff selection. The consultant plays a crucial role in planning with administration for the most advantageous placement of gifted children. He should make sure that administrators understand the special importance of a teacher model who manifests curiosity and interest in many fields, enjoys and values learning, and loves books, understands the intellectual and psychological maturity which is characteristic of the gifted, respects their need for exploration and new experiences, and is unthreatened by his often indirect role in furthering the learning of gifted children.

In discussions of teacher qualifications for working with th gifted, the consultant has the responsibility of frankly presenting those qualities which he regards as essential. While research data on teacher qualifications are meager, the consultant does have some information available, and experts who have worked with teachers of the gifted have compiled useful lists of qualities to be considered if choices can be made. Other things being equal, high intelligence is an asset, since the teacher who is bright herself is likely to possess the qualities of scholarship and background of information which enable her to work with the gifted without feeling threatened or inadequate (Wiener, 1960). Other qualities discussed in the literature should be reviewed with administrators as well (Educational Policies Commission, 1950).

Since the question on distributing the opportunity to teach the gifted is raised frequently by administrators concerned about teacher morale, it also should be discussed fully and frankly. The consultant may render assistance to hesitant administrators by suggesting that they require all those who wish to teach groups of gifted pupils to take preparatory course work. He also may help the administrators by suggesting that they periodically remind their staffs of the universal values inherent in all teaching which is well done, independent of the type of children taught. Administrators also may point out the extra demands in successful teaching of the gifted.

Teachers who wish to teach the gifted because they erroneously consider the assignment easy may be less eager when they are aware of the extra time and energy required in the position.

Supervisory Relationships

The consultant who maintains harmonious relationships with teachers does so by making his services significantly valuable to them. The person who can ease the work of teachers—by making useful suggestions, by providing them with needed materials, by demonstrating new methods, and by recognizing outstanding work which they have done—is the one who has little difficulty in developing a high *esprit de corps.*

Improvement of the Teaching Function. The primary reason for having a resource consultant is not administrative; as a consultant, his major task is the improvement of the teaching function. He can accomplish this best by regarding himself as a potential contributor to the success of the teacher, and by directing his efforts to this end. With this point of view, he sees himself and his activities in a different light than if he views his task as one of direction and organization.

The consultant who works for the success of the teacher plans professional growth programs on the basis of teachers' requests and needs. Rather than a static program projected far in advance, the program is kept sufficiently open to meet unexpected requests. The teachers themselves are involved in both planning and presentation insofar as possible, since an excellent teacher specialist may have more to offer his colleagues than an outside authority, and since planned teacher demonstrations and subsequent discussions are an excellent avenue for professional growth.

The consultant may recognize and publicize the work done by teachers and pupils in various ways. Rather than taking responsibility for presentations regarding the program, he may ask one or more teachers to prepare talks on outstanding activities. Teachers who appear before boards of education, professional educators, PTA groups, or service clubs gain stature and derive professional benefits from the experiences. In many instances, teachers and pupils have planned demonstrations which present the values of the special program for the gifted in an extremely clear and meaningful fashion. When such opportunities are made available frequently by the consultant, teachers have a much greater opportunity for learning and recognition than would be the case if the consultant assumed all responsibility for public relations. And they are much more supportive of the program.

The sponsorship of demonstration activities, the preparation and dissemination of special curriculum materials, and the initiation of special demonstration projects are all excellent means for program improvement and staff learning. The practice of encouraging production through these and other means and of giving wide recognition to excellence within the teacher group does much to encourage productivity and high standards. As a program becomes a group effort rather than that of a single individual, staff morale should rise and staff involvement should increase. The consultant who stimulates effort and encourages the full use of teachers' talents, who serves as a resource to them in the improvement of their performance, and who plans opportunities for plaudits for outstanding contributions within the total staff and community at large works in much the same fashion as does the successful teacher of the gifted.

Intraschool Staff Involvement. Encouragement to those who can make contributions to better programs for the gifted extends to all personnel within the school, including its teachers. An outstanding program for the gifted requires the utilization of all available talents; persons who are directly involved by the consultant, whether their special fields are in curriculum, school psychology and research, or other fields, should be invited to contribute whenever their knowledge can improve the program. The consultant should seek to develop the involvement and interest of all personnel, particularly the professional staff. This is important in relation to research personnel as well as academic staff, unless the consultant is well prepared in these fields. Carefully planned research and evaluation should be continuing features of the program in order to assess the effort, plan changes, and inform the staff and public about the effectiveness of the program.

Coordination with Other Groups

The community as a whole has direct educational contributions to make to programs for the gifted. These go beyond the usual donations of funds, books, and materials, to direct participation in the teaching process. Every community has within it scholars and specialists in particular fields who possess aptitude for working with young people. The opportunity to communicate with an adult scholar or artist in his field of interest is an unparalleled learning opportunity for the gifted young person.

The key to success of a community sponsored program lies in the careful selection of adults whose interests match those of the young people, and in preparation for their contacts with the students. The consultant plays a vital role here in guaranteeing insofar as possible that the adults will relate well to the young persons, and in helping the adults to utilize interesting means for communication.

Parent organizations often can provide direct assistance by arranging special series of lectures on requested topics, by providing for study trips, or by serving as sources of information themselves. Developing support for the total program within the community is an important function of the parent group as well.

The consultant for the gifted should be as aware of the potential contributions of community service clubs as are consultants in other special fields, but perhaps for somewhat different reasons. Service clubs may provide funds for needed remedial assistance to all students, including gifted children who may have some physical problem. In addition, they may contribute directly in those individual situations where an extra expenditure of funds is required. The service club, for example, may purchase the raw materials for individual research, may provide special lessons for the child with unusual talent, or may pay for the special correspondence courses needed by the student who has taken all of the courses offered locally. If service clubs are kept aware of such needs, they also remain aware of the significant value in a continuing program for the gifted.

Constant contact should be maintained with state and federal agencies which can improve the quality of the local program. These include libraries and other sources of publications, as well as the usual educational agencies. Often gifted students, especially at the junior and senior high school levels, need books and materials which cannot be obtained locally. If communication has been established with university, county, or state librarians, it may be possible to obtain needed documents from them.

With the rapidly increasing programs of educational research and demonstration projects, consultants have an opportunity to participate in experimental programs and to obtain support for programs which would be difficult to finance locally. Participation with other systems provides an opportunity to obtain and exchange ideas, and then apply these ideas locally. Participation in study and research with other consultants is an excellent way to keep pace with new developments in the field.

The Future

Some day the importance of assigning a consultant to programs for the gifted as a sole responsibility will be recognized by school boards and school administrators. They will recognize the need when they become aware that this individual, properly qualified for his task, necessarily functions at the forefront of educational development. In those systems where this type of consultant has been active, educational experiment, creative innovation, and fresh ideas have produced change and improvement in school procedures at large. When the consultant works with personnel in the interests of individuals and demonstrates convincingly the need to eliminate some of the rigidity of school procedures in favor of learning, change begins.

Flexible scheduling, erasure of grade level boundaries, and elimination of restrictions resulting from individual planning for the gifted have caused examination of the program in general. While much of the content on which the gifted child flourishes is completely inappropriate for the average child, the practice of examining set time schedules and rigidly established content is as applicable to the program of the school in general as it is appropriate to the gifted program. The habit of examining the true relevance of heretofore sacred practices is a healthy result of these programs.

The assignment of the consultant, to be workable, should involve no more than 100 gifted pupils if they are heterogeneously assigned, and no more than 250 if they are grouped in various ways. The consultant who gives meaningful service to teachers, who works with administrators, who maintains close communication with parents and with community groups, who participates in research, who maintains contact with other consultants and with state and federal agencies, and, most important, who contributes directly to the improved education of the gifted, needs an extraordinary supply of time and energy. Providing appropriately for the numbers of gifted students just cited is more than enough to challenge the person who does his best.

It is true that the suggested practices and recommended tasks for the consultant outlined in the present chapter mean that the consultant for the gifted must be an unusually well qualified person. The person who works in this field must be well prepared in order to know resources and to be effective with the wide variety of gifted children and adults he must contact. If he were properly prepared for the tasks he could assume, he would be well versed in not only numerous subjects, but also in psychology and research methodology. In short, he would be a rare person. In actual practice, the consultant may strive toward needed qualifications and apply the psychological maturity expected of him to effect his direct role, to bring children and teachers the best human and material learning resources he can find, and to make the total program one which will endure long past his tenure.

The involvement of the community at large in the program should lead in time to the financial support required to purchase materials, special trips, individual research by pupils, special equipment, books, and other items not presently available to the gifted. As people participate in a program, they learn of its value and, having learned, they become enthusiastic advocates.

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9/ The Consultant for Children with Special Learning Disabilities

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The decade of the Sixties will probably be recorded by the historians of special education as the gestational and neonatal periods of a new organism on the terrain of community school space—the child with special learning disabilities. The parental history of this offspring is somewhat obscured. The father of the concept must at this point be listed in its case history as "unknown," but its mother is unquestionably defined as the maternal composite called the community school program. The pregnancy course of this organismic concept has not been a quiet course. The concept has been near abortion at many points along the line. It has not had a comfortable incubation period because the gestational time was marked by an insistent restlessness, a demand for awareness and recognition, and an explosive propulsion toward birth occasioned by thousands of children who have failed to meet the learning criteria defined by the curriculum. The delivery has been precipitate and there are many educational authorities who would be inclined to classify this delivery as having been a breech or a transverse process.

The gestational period has passed. It has come alive. It must now struggle for survival on the educational terrain. It is kicking, thrusting, rolling, tossing, stretching, and thrashing about in its neonatal period. As any worried mother might react when confronted with developmental anomalies or developmental inconsistencies in her offspring, the maternal community school system has initiated a search for authoritative reference. It turned to the educational and psychological research literature as a natural mother might turn to Gesell or Spock seeking to determine the significance and the meaning of each observed behavior. If the answers are not readily apparent in the literature, the school authorities give consideration to soliciting the diagnostic acumen of a specialist—the educational consultant.

The identity of the organism is perhaps the primary question. Who is the child with special learning disabilities? What are his characteristics—both positive and negative? Where does be belong? What degree of significance should be assigned to his developmental problems? As a natural mother the symbolic mother cascades question after question toward the consultant. Sometimes the questions are actually a search for confirmation of an answer already formulated. Sometimes the questions cover areas of knowledge not available to the school "parent." Sometimes the questions defy intelligent response from any source.

The value of a consultant, the use of a consultant, and the role of a consultant in this newly discovered terrain are the descriptive focus of this discussion.

The Administrative Strategist

Consultants may be broadly classified into two categories: the *administrative strategists* and *clinico pedagogists.* The administrative strategists are experts on questions dealing with legislative procedures and can devise strategies for attaining permissions and enabling clauses. They can also advise on supervisory reciprocations, liaison relationships, and charting of administrative flow. They may be helpful in devising public relation strategies, community interpretations, etc. This total area of function has progressively become more and more a field of independent specialization. These general considerations require a special type of consultant, and school systems would be wise to recognize this set of skills in the selection of consultants.

The Clinico Pedagogist

The second group designated as clinico pedagogists represent a high degree of specialization in the dynamics of human learning and can focus upon the multiple areas of setting criteria, methodology, assessment, curriculum, evaluation, and creativity in teaching. Problems in choosing materials and defining remedial strategies are their forte. They address their attention to problems of grouping, homogeneity, critical evaluation of newly promoted teaching methods, and assessment techniques to denote child progress.

The comments on consultation in the area of learning disabilities are aimed at delineating the role of the clinico pedagogists. Each of the two types is deserving of full discussion, but the choice here is to concentrate on the child oriented consultant and assign the discussion of the administrative strategist to some other point in time.

Regardless of the self concept of the consultant, the school personnel accord him a status of *expert* by extending the invitation to consult. The school people therefore expect answers to their queries, meaningful suggestions to resolve their prosaic dilemmas, and a scope of information resource extending beyond their own boundaries. In other words, the schools expect expertise. With that expectation they also impose an automatic obligation upon the consultant to guide and direct their thinking into channels and areas calculated to produce the best long range results.

Developing a Proper Perspective

Perhaps the foremost obligation imposed upon the consultant in this area is one of aiding the school personnel to place this new educational entity into proper perspective on the total educational scene. From this standpoint he must be prepared to help the schools clearly distinguish the unique character of this *new* program apart from existing programs. There is much reason to believe that the child with learning disabilities came to the attention of educators primarily because none of the existing units in special education was adequately equipped to deal with the problem. Therefore, the first question confronting the consultant is related to helping the school personnel clearly differentiate this child from other special education children. Why and how is he different? This is probably the most vital question in this field and it may take years to establish a clear acceptable answer, but the question cannot be sidestepped by the consultant who is asked to serve the school in developing thinking and programing in this area of education. The neat formulation of an acceptable definition prefaced by the phrase, "A child with a learning disability is one who ________" will probably be subject to delay as arguments ensue concerning adjectives which should be included and excluded, but the delay of a consensus definition will not and should not deter the development of a program. The "firing line" educators cannot wait for national consensus, and this is as it should be. Each school system should derive its own operational definitions to satisfy its own peculiar needs and the day by day experience of many, many school programs should contribute to solidifying an acceptable categorical definition. However, within this individualized process the consultants should assume responsibility for developing a perspective in each program toward an eventual consensus.

Whether or not the label of learning disability eventually becomes a more acceptable label than the equally vague "child with minimal brain damage," only time and experience will determine. By whatever label a local school system chooses to mount its program, the consultant's focus should continue to rest upon the "learningness" of the child, and the consultant's responses, suggestions, and recommendations should always be receptive to guidelines from the front line of the battle in the classroom. Regardless of diagnostic labeling, the teacher's role is concerned with developing, enhancing, enriching, and advancing the learning of the child. The job of the school is specified as a here and now proposition, and the consultant must find ways to help the schools with that demanding proposition.

Screening

The consultant in this area may be asked to serve the school in a number of different terrains of consideration. School personnel may choose to seek advice in establishing a set of criteria for selection of children for enrollment in the new program. In this instance the consultant must be prepared to discuss the possible values of certain standardized tests as one of the criteria. It is very likely that the school people are already well acquainted with most of the psychological or educational instruments they intend to employ and are not interested in an elementary course in the organization of a particular test. They are concerned, however, with the question of whether the results of a given test will be critically sensitive to crucial areas of performance in the child. Despite the fact that most test batteries employed in screening procedures fall into a general traditional pattern, the consultant must bring information to the personnel involved about the interrelatedness of test battery scores and findings. It is not enough to rely simply upon a listing of scores from different tests to convey the findings of a significant learning problem. It is the dynamic interrelatedeness of these disparate findings which is critical in setting forth a criterion. A simple numerical notation of performance below the norm conveys no significant information even for screening purposes unless that finding is embedded among other findings in a dynamic portrait of a failing learner. Since the emphasis must be placed constantly upon the learning problem of the child, the consultant is obligated to bring to the program personnel the specific relationship of each test score to a pattern of learnability. A set of instruments can be impressively defined as a screening battery and can yield an awesome collection of quotients, but often has little value to the teacher in her eventual work with the child. Consequently, the consultant is in a position to bring a critical evaluation of both traditional tests and new instruments to the attention of the program planners within the framework of utility for further use beyond the screening effort.

Since the success of the program will to a large extent be related to the tight knit homogeneity of the enrolled learners, the tests employed in the screening battery must be expected to yield more than numerical quotients. The test criterion set must also yield a dynamic utilitarian definition of homogeneity. The conventional view of screening batteries must in the long run become deleterious to the composition of a sound, adequate, and surviving program. While at first glance it may seem an easy matter to set a screening battery, the traditional casualty rate for screening batteries is alarmingly high. Screening batteries have a way of glittering brightly for a time and then gradually fading into imagelessness as they *fail to screen, fail to predict, and fail to advise.*

The consultant must therefore help the school select those devices for screening which have enjoyed the greatest credit of predictability. Research from the literature, experiential background, dynamic understanding of learning, and a broad knowledge of human behavior become the critical tools of consultation in this area. It is unlikely that schools will be so intrepid as to initiate SLD without some form of screening battery—some record must be on file! The consultant must assist in making that battery the most economical, most practical, and most comfortable set of devices currently possible.

Program Units

The consultant must assist the schools in considering the various strategies in relation to the temporal intensity of the therapeutic program. A variety of courses is open to the schools.

Children may be assigned to periods of individual instruction daily or several times per week for one hour sessions while concurrently maintaining their regular enrollment in their assigned grades for the full period. The usual method for handling such a program is to employ an itinerant teacher. Such a teacher carries a caseload of failing pupils from a number of schools and becomes a briefcase instructor, carrying her curriculum in a satchel wherever she goes. Frequently the mechanics of toting have impeded the creativity of this teacher because she must take into consideration the portability of her idea from school to school. She must also take into account the space assigned to the itinerant teacher. The architects who designed school buildings in the past could not foresee the need for itinerant teachers and as a consequence did not design space for this purpose. The itinerant teacher usually is assigned whatever space may not be occupied on a given day. In one school she uses the nurse's room, in another she uses the cafeteria, in a third school the vice principal gives up his office on her scheduled days, in a fourth school she uses the art room, and so it goes. If she is fortunate she may be able to maintain a quadruplicated set of teaching equipment and thereby reduce her transporting problem. In the author's experience, few itinerant teachers have been so blessed.

These mechanical problems in the itinerant teacher concept are emphasized because they inherently impose a curricular limitation upon the teacher. The nature of her job essentially limits her therapeutic relationship to the learner to one of table top teaching. Two chairs and a table become the basic structured field of operation.

Not all individual instruction is managed by itinerants, however. Some schools have employed a remedial tutor as a full time teacher in a single school building to serve the children of that school. This seems to be a far wiser course than the itinerant approach. When the learning disability child is finally defined in terms which can be accepted by the majority of educators, we believe that the incidence of such children in every elementary school in the nation will more than justify the employment of a learning disability specialist as a full time tutor in each school. In spite of the multiple merits which could be cited in support of such a notion, it must be classified as a remote concept for some future generation to develop. For the near future the concept of the itinerant teacher is likely to prevail with all of its associated limitations.

Assuming that individualized instruction, if available, will be conducted by an itinerant teacher, it is critical that such a teacher's activity be governed by some principle of economy. Her case load must be built upon the premise that she will work with only those children whose learning problems dictate that any form of group instruction would be a deterrent to the resolution of the child's problem. It must be noted here that every child would benefit from tutorial instruction. Historically, formal instruction was exclusively tutorial. Mass education is more economical but not necessarily more advantageous to the learner.

In this area of consideration the consultant must assist the schools in developing a precise delineation of those characteristics in a failing learner which clearly dictate that an individual relationship is the only approach which could modify the learner in a positive direction. For some children, an individual tutoring relationship has proved to be the only satisfactory approach to correcting their learning difficulties. Unfortunately, such a decision is usually made after a variety of other approaches had failed, derived from another experience or several experiences of further failure for the child. Such a process represents a therapeutic waste and further embeds the child's learning frustration.

The consultant can help the schools reduce therapeutic wasting by delineating the tutorial syndrome. Such a syndrome is not easy to define but must concern the consultant if educational economy is to result for the teachers and the learning disability pupil. It is not possible to prescribe the frequency with which a child should be seen until the nature of his learning problem has been delineated. Once the syndrome is defined, the temporal frequency is amenable to its definition. Here again the consultant can draw upon experience, research, and speculation in suggesting intensity of contact.

Educational programing has traditionally been a group instructional process. For economic reasons, the educators are more likely to consider a group process of some sort as the better course of action. A concept of group instruction for children with learning disabilities, however, poses an array of problems. The most perplexing problem is one of defining a homogeneity factor among the failing children. Most learning disability classes currently operating seem to have assumed the common factor to be academic failure. This assumption results in groupings based upon a common level of academic retardation usually defined in terms of reading performance. Groupings based upon this premise inevitably lead to a modified curriculum of remedial reading. Fortunately or unfortunately, the children themselves persistently seem to thwart such an organization by developing their academic inefficiencies from a variety of sources. Most educators have a painful appreciation of the fact that a group of fourth grade children with identical deficiency scores on the academic achievement tests are far from homogeneous when it comes to defining the respective reasons for their reduced scores.

For the sake of argument, we may grant that an academically homogeneous group could be composed. School personnel are then faced with the task of deciding how many of these homogeneous learners should be enrolled in one group. If the number decided upon is approximately one-third the size of a regular class enrollment, the educator is making the assumption that the child can learn in a small group what he could not learn in a large group and he is suggesting that the child's academic failure may be attributed to congestion rather than to some more profound factor. If the educator decides upon a grouping which approximates the size of a regular classroom group, an assumption is made that size of the group is not a significant factor but rather that the caliber of teaching is paramount. This grouping decision essentially conveys the notion that the learner who failed in the regular curriculum will learn in the therapeutic program the skills which he did not learn in the regular grade because he will be taught differently or more efficiently. (Incidentally, if a group of learning disability cases could be found who were truly homogeneous in academic performance, the special teacher would enjoy a learner similarity which no teacher in a regular classroom has ever experienced.)

In spite of the ease with which we might derive a homogeneity on the principle of equal academic retardation, classroom experience historically verifies the pitfalls of such a concept. The decision about the number of children to be placed in a single setting is also rife with problems for the educator. In many instances, the number or size of the group has already been arbitrarily determined by statute, and, if funds are required to support the program, the educator must conform to the prescribed enrollment figure.

Such a legal process is defined by economic assumptions and by a global presumption of homogeneity under a particular educational label. While this arbitrary definition of group size is valuable from an administrative and economic standpoint, it frequently creates a hardship for the community educator trying to establish a program based upon dynamic needs. Only a few states have devised specific legislative enablements in the area of learning disabilities, so most of the educators still enjoy a range of freedom with respect to group size.

It is very likely that a series of consultants would each hold a different viewpoint in regard to optimal group size in this newly developed field. There does, however, seem to be some unanimity in the belief that the size for learning disability groupings should range between 4 and 10 children per group. The rationale for any specific number is currently a matter of individual preference, clinical experience, and theoretical notions. Optimal group size has never been truly experimentally validated and there is no reason to expect this new field to suddenly settle an historic issue. Years of experience will undoubtedly build stronger convictions in this area but, for the present, it remains a strenuously debated issue.

The consultant must hold some conviction on the topic of group size if he is to guide his consultees, and he must also convey a convincing rationale for his belief to the school personnel.

The question of developing group or individual instruction units in the field of learning disabilities has another variable to be taken into account—supplementary or segregated units. Supplementary units are parttime programs which retain the child's enrollment in his regular grade excusing him on a regular schedule to attend therapeutic group sessions. These may be set up as half-time units morning or afternoons or on a Monday-Wednesday-Friday or Tuesday-Thursday basis for several hours each time. Such unit programing suffers from the constant criticism of the regular classroom teacher, who often feels that such periodicity deprives the child of certain valuable lessons in the regular curriculum and takes him out of his regular program at crucial times. The segregated unit is a full time class for children with learning disabilities in which the children have no interaction with their regular grade.

Even though the educational entity is a recent arrival on the special education scene, there are already conflicting voices on the question of parttime units versus fulltime units, and the arguments are convincing on both sides of the question. Into the midst of this fray, the consultant must project himself to some position on the issue.

It would appear logical to assume that the best organizational structure would be a flexible program which offered all possibilities to an educator seeking an appropriate setting for a given child. Many educators subscribe to a concept of flexible programing, but while voicing affirmation of the concept, question the practicability of initiating such structure at this time. Other educators are firmly entrenched in their beliefs regarding segregated units. The issue undoubtedly could be easily resolved if a clear line of experimental evidence would appear detailing a paired associate process of relating learner characteristics to a specific intensity of programing. Regretfully the typical approach is to settle upon one type of service and to rest the case on that structure. This approach establishes a program where none existed before but does not contribute to precise delineation of learner characteristics. It is here that the consultant can exert an influence —particularly in this early stage of development—by urging the schools to initiate a flexible program as a clinical demonstration form of research in order to procure information which will eventually allow for precision.

Whether a school system elects to inaugurate a flexible program in this area or decides to confine its efforts to only one of the program types described above, the consultant must dedicate himself to the task of helping the school personnel to delineate carefully learner traits and responses. There must be some form of evaluation as to whether the child's failure or success in the specialized program is truly attributable to the particular selection of an administrative unit or to some other factor. The consultant can exert a vital influence upon the character of this entire field with the advice he offers on the topic of unit structuring. Flexible programing is advocated as an administrative concept which holds greatest promise for precise delineation in the near future.

Therapeutic Strategies

The consultant must serve the schools as a therapeutic strategist suggesting specific methods and techniques which are calculated to produce best results for the learners. To devise these strategies, the consultant must have some degree of familiarity with the various remedial techniques which have been described and utilized in certain centers, and hence he must be able to discuss meaningfully the pros and cons of these methods in respect to the children with whom the school is concerned.

Every educational methodology has historically risen to a point of prominence, momentarily acclaimed by one and all, only to be pushed aside by the next therapeutic "rookie" bidding for stardom. Each theory has retained its advocates, suffered its enemies, and survived—perhaps not quite as scintillating as in its period of prominence—but yet alive. Each therapeutic theory was generated by the dedicated effort and sincere beliefs of individuals or groups devoted to the optimization of learning. In the opinion of the conceptualizers the theory was valid and there can be no question that each theory had validity—*for some children.*

The historical fate of remedial strategies has run a similar course. At first a strategy rises as a new found answer to a perplexing problem and the glowing accounts of its successful applications are heralded from coast to coast. Thousands of restless teachers and clinicians seeking to find more effective methods for resolving child learning dilemmas eagerly test it out with variable results, usually not quite as dramatic as the original advertising suggested, but always helpful to some children who have not responded to previous strategies. This is perhaps all that we can hope for in a new theory—that it will represent an advance over our previous understanding, but it will probably not serve as a universal answer to all learning problems. New theories have come and have faded, not into oblivion, but merely to a position on the therapeutic shelf to be called upon in particular circumstances to resolve the unique problems which generated its conceptualization. Educational theories may be regarded as failing to fulfill a universal need but should not be discarded because of this failing.

It is perhaps most advisable to believe that every educational strategy ever conceived has value—for certain children. As we become more sensitive to learning problems and more astute in our observations of child behavior, past and present theories can be intelligently and selectively applied to developing strategies for given children. It is a truism to state that the therapeutic strategy should be dictated by the specific needs of the learner—the strategy should fit the learner instead of the learner fitting the strategy. Few educators would disagree. This truism, however, is frequently ignored as remedial educators become devotees of a particular method, forcing the method upon children in an uncomfortable fit and eventually rejecting the child because he does not respond. If the truism is vital, it is imperative that each remedial strategy be assessed in terms of its strengths and limitations with some clear direction for teachers in terms of the learner characteristics which would most likely benefit from a given theory. The consultant should bring such knowledge to the school personnel, defining the respective merits of each theory or method of remediation and assisting the teachers in the selection of an appropriate technique for a given group of children.

An approach which seems to have won popular favor is the so called eclectic approach. In the day by day process of remedial education the identification of an educator as an eclectic usually refers to the fact that he has no real understanding of any single theory and does not truly appreciate when and where it has application. As a consequence, he becomes a sampler, approaching remedial methodology as though it were a theoretical buffet to be sampled in small doses. The net results of this sampling technique are that no approach is ever fully employed, and the success or failure of the effort can never truly be traced.

We emphasize the point of eclecticism because there is probably no field of education in which such an approach is more widespread than in the area of learning disabilities. Educators seeking to benefit this child have scrambled to the therapeutic shelf to drag down whatever they could reach, with only minor efforts to evaluate the efficacy of a given approach. The fact that the remedial teacher is not adequately prepared to conduct a certain approach has not been a deterrent. The fact that a given approach has been shown experimentally to hold limited utility has not been a deterrent. The fact that a specific approach is designated for a totally different type of problem has not been a deterrent. The scramble for remedial approaches has unfortunately become a hit and miss proposition of trying everything on the market in the hope that something will work.

The therapeutic repertoire of the remedial educator is essentially limited to the field of reading. Remedial reading specialists may draw upon more than ten different well defined approaches —all of which have proved effective. (In the areas of arithmetic, spelling, and writing the choice of remedial approaches is quite limited.) Language therapies for children with receptive or expressive communication difficulties also have been defined and employed successfully. Remedies for perceptual deviations tend to be a random and diffuse collection of techniques lacking any degree of organization and sequentialness. Despite many years of dealing with learning problems of children, the world of remedial education is filled with a rather haphazard assortment of techniques.

In this confusion of remedial approaches, the consultant must serve as the arbitrator and the mediator to bring an intelligent order and reason into the therapeutic program. The consultant must bring perspective to the therapeutic scene, providing a critical resume of the respective validities of various approaches in the light of the learning characteristics of the particular group of children for whom the educators wish to mount a program.

Research Integration

The consultant must be a synthesizer of current research within the field of learning disabilities, and also must be able to bring pertinent information from research in other fields to bear upon the development of appropriate programs for these children. Research in physiology, neurology, psychology, sociology, anthropology, biochemistry, and other fields which may be directly or indirectly related to improving our understanding of the dynamics of learning must be a part of the consultant's offering to the school personnel. Findings from each of these fields must be utilized by the consultant in offering guidance and suggestion. The current understanding of the physiology of learning must govern the search for explanations to account for the learning inabilities as well as serve as a base for developing programs.

It is the consultant who is expected to encompass a range of knowledge beyond the artificial boundaries of education. He must bring to the task an interdisciplinary viewpoint, not simply an espousal of the virtues of an interdisciplinary approach. He himself must represent an interdisciplinary approach because he is acquainted with a wide range of research and practice among many disciplines. In recognition of the fact that the child with a learning disability is likely to be a composite of many minor diagnostic entities which might conceivably touch upon the provincial boundaries of a number of disciplines, the consultant has the obligation to represent a viewpoint of synthesis bringing the research from many fields to bear upon the single task of clarifying the dynamics of the learner's problem and suggesting possible courses of action. It is vital, therefore, that the consultant in the field of learning disabilities have a personal viewpoint of synthesis deriving some unification out of worthy but disparate research reports.

We do not feel that the consultant must be a physiologist, chemist, physicist, anatomist, neurologist, and so on, but he should be particularly sensitive and knowledgeable regarding the research in each of these fields as it pertains to the dynamic learner. Having brought these disparities into a meaningful synthesis for himself, he can communicate this unity of conceptualization to the school people. Synthesizers in the field of education are a rare breed and are even rarer in the field of special education. Ability to synthesize must be regarded as a critical characteristic in the consultant serving the area of special learning disabilities (SLD).

When we consider the emergence of the SLD child on the special education scene as a result of a void in the existing proliferated structure, it becomes increasingly clear that this child may have a touch of many existing syndromes, but may defy precise classification in any single existing group. As a consequence the consultant to this area is inherently obligated to have a respectable knowledge of at least two major fields—general education and the wide range of special education. If school personnel are to be forced to seek out a specialist in each trait which may be represented among the children, they will be faced with an impossible task in securing consultation. Under such conditions, each consultant will respond in his or her respective area of specialization presenting an intense but fragmental coverage, and the school authorities will then have to provide their own synthesis.

If authoritative figures, recognized for profound but narrow areas of specialization, are to make up the major body of consultations in this area, two possible outcomes are likely to occur. One outcome will be a neglect for the unity of the learner. Since "narrow" consultants are more readily available, the school personnel are likely to expend their entire consultation budget on a series of fragmented consultations and emerge in a confusion of fragmentations.

This approach will also yield another form of outcome—the personal intensity of each consultant in respective areas of disability may well occasion the development of programs which are in fact hasty remodelings of other programs. This could lead to classes for children with special learning disabilities which are merely upgraded versions of existing patterns for the mentally retarded. It could lead to a revised edition of group remedial reading units, revised aphasia therapy, and so on.

The foment on this battlefield of learning disorders is a derivative of a model that has rejected this entity. If the needs of this child could have been met by simple revision of existing programs, the recruitment of such sizable battalions could never have occurred. The dynamics of development of the SLD child as an educational entity clearly demand imaginative originality in programing. The consultant, therefore, cannot simply play the classical tunes in another key but must rather help the schools to compose new melodies of programing. The concept of a synthesizing consultant represents an approach to original composition. Out of synthesis new relationships are derived and from new relationships come original principles which have not previously existed. Humpty-Dumpty can only be put together again with the glue of synthesis, and the glue makers must be the consultants called upon by schools to build effective programs. All the king's horses and all the king's men couldn't manage for the original Humpty, and a legion of proliferated consultants would not be any more successful with the present day Humpty. Only as the consultant can represent a synthesis of research and practice from many fields can the schools be guided toward creative programing. The consultant should "know what's going on" across the dynamic frontier of behavioral research and should be able to advise the schools on appropriate strategies in the light of such broad knowledge.

It will be unfortunate for the history of educational progress if the child with learning disability simply becomes another categorical box in the proliferated organizational chart of the community special education program. Perhaps the speediest method for stultifying development of ingenious and creative programing is the accelerated push for a precise category. The general history of such action in education has been to reduce exciting, challenging, and demanding dilemmas to the level of prosaic categorization, with the net loss occurring as a sharp decline in educational creativity.

To stall the formation of a prosaic proliferated box there are a number of blue sky considerations which should be carefully studied during the "drawing board" stage of learning disabilities before the category is converted from the blueprint to the brick and mortar of educational administrative structure. This is the period when the architects of special education still have time for conceptualizing, revising, remodeling, and reconsideration. If the consultant in the area of learning disabilities is to fulfill an architectural and designing role, the usual image of consultation must be revised.

A suggested revision of the consultant image derived from experience, some data, and a large measure of free floating in cognitive space is offered below as a starting point. It is frankly intended to excite controversial discussion in the hope that such discussion will inevitably lead to revision at some point beyond the present image of the educational consultant.

1. The consultant must accept the responsiblity of confining his recommendations to the classroom box. Any solutions or suggestions which extend the therapeutic activity beyond those rectangular boundaries should be forbidden. He must operate within the framework of design which states that his architectural limits for educational modification of the learner are bounded by the time span from eight o'clock to three o'clock or five days per week, the availability of an adult figure called a teacher, and the physical setting of a classroom. If the consultant can accept such limitations, he willingly forsakes the opportunity to refer the child to some community specialist or to ancillary personnel of the school. He eliminates from consideration any suggestions to modify the child's home situation by changing parental attitudes or personalities.

   Also, the diagnosis of the child is deprived of value except as such diagnosis may have direct bearing upon the five day week containment of the child. If the diagnosis is to have any significance at all, it must be defined in terms of its day by day and hour by hour relationship to the child's learning in the classroom. Traditional explanations for learning difficulty must be deleted from the consultant's repertoire and an entirely new conceptualizing process must be organized. The child must be saved in the classroom incubator. School personnel must steadfastly reject any solution which is referred out of the classroom. There is no question but that this is a tall order to fulfill. There is also no question but that this requires a considerable shift in conceptual engineering.

2. The consultant must become a specialist in the physiology of learning, prepared to advise the schools on the methodology for creating an optimal learning climate. Specialization in this area will require the translation of many profound but esoteric bits of physiologic and neurophysiologic research into practical classroom use. The research on barometric changes must wisely be applied to classroom learning. The research on visual containment in the nearpoint desk top task must be made utilitarian to the teacher. The laboratory understanding of the arousal and alerting functions of the reticular activating system must find its way into the prosaics of classroom life. The research on adverse stress as a component in failure must lead to a search for the operation of stress agents within the classroom. The investigations of variable illumination according to the demands for visual resolution on many different tasks must be brought to practical application. The rhythm of educational activity must be regulated according to the many forms of temporal pacing which exist in each learning organism. The research on the design for comfort in a closed environment must be studied for possible application to classroom living. Sensory deprivation experiments must be related to classroom experience. The extremely imaginative experimental work on gravity which contributed to the eventual reality of a "walk in outer space" and all of the other experiments which will enable man to explore new worlds must be examined for their relevance to the academic terrain of the classroom.

These and many more physical, chemical, and sensory researches must be brought to bear upon the design of a more imaginative educational future, and the consultant must chart the course and draw the blueprint.

10 / Profiles of Contributors

Kenneth R. Blessing, Ph.D., is coordinator of special education services, Bureau for Handicapped Children, Wisconsin State Department of Public Instruction, and is a visiting lecturer in the Department of Behavioral Disabilities, University of Wisconsin, Madison. A graduate of the former Milwaukee State Teachers College with a major in the education of the mentally retarded, he received his M.Ed. from the University of Wisconsin at Milwaukee, and his Ph.D. from the University of Wisconsin as a fellowship recipient under PL 88-164. He taught retarded classes in the Racine Public Schools and was a clinical tutor of brain injured children at the Cove School in Racine and at the Jewish Vocational Service in Milwaukee prior to affiliation with the state educational agency. His 13 years of state service have included such roles as state psychologist, supervisor of special education, and coordinator of services for the retarded. Dr. Blessing has conducted summer workshops for teachers of the retarded on the University of Wisconsin campus, has supervised student teachers, and has engaged in university affiliated research. His primary vocational and research interests have been in the areas of special education administration, vocational potentials of trainable retardates, psycholinguistic remediation of disabilities, and utilization of paraprofessionals in special education. He is the author of numerous professional articles and papers in these areas.

Lou Johnson Alonso, M.A., is assistant professor of education and director of the US Office of Education Special Education Instructional Materials Center at Michigan State University, East Lansing, Michigan. She received her degrees from Michigan State University in speech pathology and the education of visually handicapped children, with minors in psychology.

Mrs. Alonso has served as a speech correctionist in the public schools of Michigan and as a teacher and administrator at the Michigan School for the Blind. Her research work includes a study of the learning of blind children in residential and public school classes of several states and also the establishment of procedures for assessing social psychological characteristics of visually handicapped students. Currently she is coordinator of the regional program preparing teachers of visually handicapped children and youth at Michigan State University and is consultant to the program for the visually handicapped in the US Office of Education.

Charles E. Henley, Ed.D., is an assistant professor of elementary and special education at Michigan State University. He received his undergraduate degree in education from De Pauw University and his masters degree in special education from Indiana State University. His doctorate was earned at Colorado State College.

Dr. Henley has worked with exceptional children in public schools, served as a director of special education for the state of Indiana, and was the first executive secretary for the Indiana Governor's Commission on the Handicapped. He is currently in charge of the program for training administrators and supervisors of special education at Michigan State University.

Hazel Bothwell, M.S., is consultant for the deaf and hard of hearing, Department of Special Education, Office of the Superintendent of Public Instruction in Illinois. She received her M.S. from the University of Illinois in speech and hearing and took graduate work for certification in deaf education at the Institute for Research on Exceptional Children.

Prior to her present position, Miss Bothwell was clinical supervisor at the University of Illinois Speech Clinic and served on the staffs of the Champaign Department of Special Education in Urbana, the Department of Otolaryngology at the Research and Educational Hospital in Chicago, and the Illinois School for the Deaf. She has written publications related to her work in the state of Illinois, is national chairman of student activities in The Council for Exceptional Children, and is active in other professional organizations.

Peter Knoblock, Ph.D., is associate professor of special education and administrator, Children's Psychological Services, Division of Special Education and Rehabilitation, Syracuse University. He received his B.A. and M.A. degrees in education and his Ph.D. in the joint doctoral program in education and psychology at the University of Michigan.

Dr. Knoblock has worked as a psychologist at Hawthorn Center in Northville, Michigan, the California Youth Authority, and the University of Michigan Fresh Air Camp. His writings and research interests include designing of programs for disturbed children and assessment of teachers preparing to teach. Currently, he is coordinator of the preparation program for leadership personnel in the education of emotionally disturbed children at Syracuse University. He recently edited *Educational Programming for Emotionally Disturbed Children: The Decade Ahead,* and *Intervention Approaches in Educating Emotionally Disturbed Children.*

Grace J. Warfield, Specialist in Education, is an assistant executive secretary at The Council for Exceptional Children, Washington, D.C. She received the degrees of B.S., M.A., and Specialist in Education, School Psychological Services, from the University of Minnesota, Minneapolis.

Mrs. Warfield served in the Minneapolis Public Schools as a teacher of the educable and trainable mentally retarded, as a school psychologist, as coordinator of programs for the mentally handicapped, and as principal of the Michael Dowling School for Crippled Children. She has been an instructor in special education for the Canadian Province of Manitoba and the University of Minnesota at Duluth. She was resource consultant to four suburban school districts in cooperative establishment of classes for the trainable retarded in Roseville, Minnesota. Mrs. Warfield is coauthor of *Understanding Mentally Retarded Children,* and is currently in charge of the publications department at The Council for Exceptional Children, Washington, D.C.

Martha E. Black, M.A., received her Ph.B. at the University of Wisconsin, her M.A. from Northwestern University, and has done advanced study at the University of Chicago, University of Colorado, and Bradley University.

Miss Black has taught in elementary and secondary schools in Wisconsin, Indiana, and Illinois. Her work has been in the social sciences, speech correction, guidance, and special education. For 20 years she was consultant to the speech correction program in the Office of the Superintendent of Public Instruction, Springfield, Illinois. Currently she is conducting a study of the speech correction program of the Bureau for Physically Handicapped Children, State Education Department, Albany, New York.

In addition to writing various articles in professional publications, Miss Black is the author of *Speech Correction in the Schools,* a volume in the *Foundations of Speech Pathology Series.*

June Bigge, M.A., is assistant professor of education at San Francisco State College. She received her B.A. degree from Fresno State College, her M.A. degree from San Francisco State College, and has undertaken post M.A. work at The Johns Hopkins, Stanford, and Syracuse Universities.

Miss Bigge taught in the San Diego school for crippled children, was a resource teacher of crippled children in a Palo Alto elementary school, and was a teacher consultant in the Palo Alto pilot program for education of children with learning disabilities associated with neurological handicaps. Currently she is coordinator of teacher training for teachers of the orthopedically handicapped at San Francisco State College.

Ray H. Barsch, Ph.D., was the director of research and development for the DeWitt Research Center for Academic Development in San Rafael, California, at the time of writing his chapter. He was formerly the director of teacher preparation in the area of physically handicapped and neurologically impaired at the University of Wisconsin. He received his B.A. and M.A. degrees from the University of Wisconsin at Milwaukee in the education of the mentally retarded and in school psychology, respectively. He received his doctorate in educational psychology from Northwestern University. Dr. Barsch is now affiliated with Southern Connecticut State College in New Haven.

Dr. Barsch has been involved in many experimental programs for children with learning disabilities and is consultant to many school systems throughout the country in this area of special education. Currently he is in the process of developing an extensive program of research in advanced preparation of teaching specialists, demonstration curricula for educationally handicapped children, and specific laboratory research in modality integrations.

Ruth A. Martinson, Ed.D., is director of teacher education programs and professor of education and psychology, California State College, Dominguez Hills. She received her B.A. in English from the Western Washington State College and her M.A. and doctorate at the University of California at Los Angeles.

Dr. Martinson has served as director of the three year California State Study of Programs for the Gifted. She has authored several monographs and articles on the gifted, and has in press a book for teachers of primary grade gifted children. She has served as a special consultant to the California State Department of Education, as a consultant to Title III and NDEA Institutes, and as consultant to various school systems. Her research work in progress is on the improvement of teaching procedures with gifted elementary and secondary school students (US Office of Education). She is chairman of the Unit Development Committee of The Council for Exceptional Children and is an associate editor for *Exceptional Children.*